



OFFICE OF THE
University Registrar

VA-1 Form for Chapter 33

Last Name	First Name	Middle Name	Vanderbilt ID Number
-----------	------------	-------------	----------------------

Student's SSN	Date of Birth	Vanderbilt Email Address
---------------	---------------	--------------------------

Permanent Address	City	State	Zip Code	Phone
-------------------	------	-------	----------	-------

School	Major	Degree
--------	-------	--------

List term for which you are applying for Chapter 33 Benefits:

Fall _____	Spring _____	Summer _____	Year _____
------------	--------------	--------------	------------

Percentage of Eligibility (POE)? _____

Has your major changed? ____ yes ____ no

Are you? ____ service member ____ spouse ____ dependent

Undergraduate ____ Graduate ____

Is the service member on active duty? ____ yes ____ no

Are you enrolled in Champ VA? ____ yes ____ no

Number of hours enrolled? _____

Will you use the VU faculty/staff discount? ____ yes ____ no

Do you expect to graduate this semester? ____ yes ____ no

Are you repeating any classes? ____ yes ____ no Please list: _____

List any courses with a "Distance Learning / Online Component" below:

PLEASE READ: Classes that do not meet for the entire semester are only certified for the period in which they meet. The VA will exclude them during the rest of the semester when calculating your benefit. This can impact the BAH for Chapter 33.

I agree to accept liability and responsibility for any overpayments that result from my failure to notify the school certifying official immediately of changes in my enrollment, school, degree, or program. I also accept liability for any overpayments resulting from the receipt of aid designated for the purpose of defraying tuition and fees that is awarded following my initial certification to the VA. I understand that:

- All course work must be required for my approved degree in order to receive VA benefits. The VA only pays for completed courses. Withdrawal, schedule changes or failure for nonattendance could result in recoupment of benefits.
- Benefits from the VA may vary from term to term and within a term based on my enrollment.
- I must notify the school certifying official of any change of address.
- I must meet VA satisfactory progress standards to continue to be eligible for VA educational benefits.
- I consent to the release to the VA all of my student education records maintained by Vanderbilt University including but not limited to my social security number.
- I have provided the most recent COE that I have received to the school certifying official.
- I must complete this form each and every semester in which I wish to be certified for VA educational benefits.
- I certify that all information on this form is complete and accurate.

Signature

Date

Please return the completed application by mail or fax (615) 343-7709. An SSN should not be sent via email:

Questions: 615-322-7701 or
university.registrar@vanderbilt.edu

Vanderbilt University
Office of the University Registrar
PMB 407701
110 21st Avenue South, Suite 110
Nashville TN 37240-7701