

# **Request for Certification Form**

Veteran's Administration

Request for Certification forms are to be completed and submitted to the Veteran School Certifying Official (SCO) every semester you wish to utilize education benefits. In order to be certified in a timely manner, you must submit this form to the SCO within 30 business days before the start of the term, unless otherwise indicated.

# **PERSONAL INFORMATION:**

LAST NAME:		FIRST NAME:	
STREETADDRESS:			
CITY:	STATE:	ZIP CODE:	
EMAIL ADDRESS:		PHONE: :	
DATE OF BIRTH:			
	MM/DD/YYYY		

# **CHAPTER & SEMESTER INFORMATION:**

### I am eligible for VA Education Benefits through the following program:

Montgomery GI Bill - Active Duty (MGIB-AD) - Chapter 30

Post-9/11 GI Bill Veterans Educational Assistance Act of 2008 - Chapter 33\*

Montgomery Gl Bill - Selected Reserve (MGIB-SR) - Chapter 1606

Reserve Educational Assistance Program (REAP) - Chapter 1607

Vocational Rehabilitation and Employment - Chapter 31

Survivors' and Dependents' Educational Assistance Program - Chapter 35

#### l am a:

Veteran

Veteran Dependent

#### I am requesting certification as a:

Full-time student (12 or more credits)

3/4-time student (9-11 credits)

1/2-time student (6-8 credits)

Less than 1/2-time student (5 credits or less)

## Semester & Year Requesting Certification:

Semester & Year

**Valid Semesters:** 

Fall (September-December)
Intersession (January)
Spring (January-May)
Summer (May-August)

# **CHAPTER & SEMESTER INFORMATION CONTINUED:**

Will you be waiving the Berkshire Community College Student Health Insurance?

Not Applicable - I am in less than 9 credits or I already waived it in Fall.

Yes

Νo

*Please be aware, you will need to waive or accept your Student Health Insurance charge by creating an account and logging into Gallagher Student.
**This must be done every Fall semester. If you were in less than 9 credits in Fall or if Spring is your first semester, you will need to waive/accept the insurance in Spring.
I am requesting Advance Payment (minimum of 30 days prior to the start of the term; not applicable to Chapter 33 or 31).
Yes
No
Not Applicable - I am utilizing Chapter 33 or 31 VA Education Benefits.
Do you intend to complete the Categorical Tuition Waiver?  **Only Applicable to Veteran & Active Duty Members.**
Yes
No
Not Applicable - I am not a Veteran.
*To determine if you are eligible, please visit the eligibility requirements provided by the Massachusetts Department of Higher Education found here.
**If you are eligible and interested in completing the Categorical Tuition Waiver, please submit the completed form along with
your Request for Certification Form and a copy of your DD214. Please note, you must complete this once per academic year.
The waiver may be opened from here.
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## STUDENT RESPONSIBILITY CHECKLIST:

<u>Please</u> be aware, your signature on the bottom of this form indicates you have reviewed and agree to all information provided on this form.

#### I have read and agree to the following:

I understand that I will need to remain at full-time status with full-term courses in order to receive my full educational/housing benefit entitlement.

I understand all of my courses I am taking must apply to my program in order to be certified to the VA.

I understand the VA will not cover repeating of a course for which credit has already been earned.

I understand if all of my courses are online, the VA may pro-rate my eligibility rate.

I understand I have access to my College Financing Plan through my Self-Service account.

I understand completing a FAFSA or MASFA is required to be considered for federal aid (PELL grant and loans) and state grants (MassReconnect, MassEducate, etc.). Without a FAFSA or MASFA aid from these programs will not be considered when creating my College Finance plan.

I will report registration changes or if I stop attending class/classes to the Veteran Certifying Official.

I understand that "W" (withdraw) and "F" (failing) grades may result in reduced payment from the VA and I could potentially owe the college money.

I understand classes which are scheduled to meet for a shorter period of time than the normal semester term dates may be paid at a different rate based on the number of credits and length of course.

I will notify the Veteran Certifying Official before the start of the semester if my benefit chapter changes.

I understand that if I fail to comply with above, it could result in an overpayment/underpayment from the VA and I could potentially owe the college money.

I authorize BCC to release information from my academic records to the VA.

STUDENT'S SIGNATURE:	DATE: