

Veterans Request for Enrollment Certification

Please complete all requested information and return this form to the Office of Student Financial Aid at the campus you attend. Please attach the most recent copy of your Certificate of Eligibility (COE) and you Member Copy DD-214. You may also fax this form and all documents to the number at the bottom of the page or email them to mcooper@johnmarshall.edu.

STUDENT INFORMATION

Last Name, First Name MI		AJMLS Student ID No.
Current Address	City, State	Zip Code
VA File Number (<i>*This is the SSN for all chapters except Chapter 35</i>)		
Phone Number:		
Email Address:		

**Chapter 35 recipients, the VA file number may be the dependent's spouse/parent SSN or an assigned 8 digit claim number.*

Please select the appropriate information below:

I am a new student: Yes No Have you ever received VA benefits? Yes No
 I am a current student: Yes No Field of Study: J.D.
 I am a transfer student: Yes No Credit hours you plan to enroll: _____

Enrollment Period Fall Spring Summer Award Year: 20____ - 20____

Are you repeating any courses? Yes No

List the semester that you are repeating courses _____

List the course(s): _____

Atlanta's John Marshall Law School
Office of Financial Aid
 245 Peachtree Center Avenue
 Suite 1900
 Atlanta, GA 30303
 Phone: 678-916-2675
 Fax: 404-873-3802

Below, select which Veterans Education Benefit Program are you requesting to be certified under this semester? You may visit www.benefits.va.gov/gibill to learn which education benefit you may be eligible for:

- Chapter 30** - Montgomery GI Bill → Active Duty? Yes No (if no, a copy of your DD-214 is required)
- Chapter 31** - Vocational Rehabilitation → (your counselor must provide VA form 1905)
- Chapter 35**- Spouse/Dependent of Veteran GI Bill → VA Claim Number: _____
- Chapter 1607**- Montgomery GI Bill (Reserve/National Guard Active Duty)
- Chapter 1606** - Montgomery GI Bill (Reserve/National Guard) → (a copy of your NOBE is required)
- Chapter 33 – Post 9/11 GI Bill** → Is this for Transfer of Entitlement? Yes No

Are you applying for the Yellow Ribbon Program if eligible? Yes No

Terms and Conditions

To Use Veterans Benefits, ALL classes that you enroll in must be required for the degree program that you are enrolled. For all “W” or “I” grades, the instructor will be contacted for last date of attendance. Not attending all classes until the end of the semester may affect your total benefit.

Reduction in course enrollment after certification will be submitted to the VA and may result in the retroactive loss of benefits unless the VA finds mitigating circumstances involved in the change. Loss of benefits could revert back to the first day of class.

Please initial next to each statement below:

- _____ 1. I am aware changes in my registration may alter the VA payments I am awarded.
- _____ 2. I understand I will be liable for any overpayment I might receive from the Veterans Administration. I also understand that I must notify the VA Certifying Official and the veteran affairs administration of any changes in my registration.
- _____ 3. I am aware that this form must be completed for each award year in which I wish to be certified.
- _____ 4. I have submitted all requested documentation.

I hereby acknowledge that I fully understand and am knowledgeable all of the above initialed statements.

Student Signature

Date

VA School Certifying Official

Date

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