



UHCL Office of Student Financial Aid
Application for VA Educational Benefits Certification

Name: _____ Social Security Number: _____

Date of Birth: _____ VA File Number: _____ Student ID: _____

Year and Semester of Application: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ UHCL E-mail: _____

Concurrent Enrollment? Yes _____ No _____

If Yes, Institution Name: _____ Credit Hours: _____ Semester: _____

What VA Educational Benefits Program are you participating in (check one)?

_____ Chapter 33 – Post 9/11 G.I. Bill

_____ Chapter 30 – Montgomery G.I. Bill With Kickers? Yes _____ No _____

_____ Chapter 31 – Vocational Rehabilitation

_____ Chapter 35 – Dependents Educational Assistance (DEA) for Spouse _____ Child _____

_____ Chapter 1606 – Montgomery G.I. Bill for Selective Reserve With Kickers? Yes _____ No _____

_____ Chapter 1607 – Reserve Education Assistance Program (REAP)

_____ Chapter 34 – Vietnam Era G.I. Bill

_____ Chapter 32 VEAP Contributory

Certification Requirements

1. Veteran must be accepted for admission at University of Houston – Clear Lake.
2. All Veterans must have a current Candidate Plan of Study (CPS) for a recognized program that is signed by an Academic Advisor on file in the Office of Student Financial Aid
3. The Veteran must complete the appropriate Department of Veterans Affairs form:

For first-time certification of VA Educational Benefits (or changing to new Chapter 33):

_____ Complete VA Form 22-1990 (Chapter 35 use 22-5490)

_____ Provide the Office of Student Financial Aid with a copy of your Member 4, DD-214 or DD-2384 (NOBE)
(not required for Chapter 35)

_____ Military Transcripts (not required for Chapter 35)

For veterans who have previously received Educational Benefits at another institution or for those who are changing their Candidate Plan of Study since they were last certified at UHCL.

_____ Complete VA Form 22-1995 (Chapter 35 use 22-5495)

Agreement

Please read and initial each paragraph in blank provided.

- _____ I understand that certification to VA-ONCE will be made only for courses listed on the CPS. If I make a change in my courses, I will provide the Office of Student Financial Aid with a copy of the official CPS change form that is available in the Dean's Office of my school.
- _____ I understand that payments for tuition and cost associated with registration costs are my responsibility, as UHCL does not offer advance pay. (Students receiving Chapter 33 benefits are responsible for percentage of tuition not paid by the VA.)
- _____ I understand that as a graduate student taking undergraduate courses, I will be paid at the undergraduate rate. I also understand that as an undergraduate student, if taking less than ½ time coursework during a semester I will qualify to receive pay for tuition only. (Students receiving Chapter 33 benefits will receive a percentage paid based on service after 9/11; Housing will be paid only for students who are more than ½ time.)
- _____ I understand that if I am concurrently enrolled, I must have lower level courses listed on my CPS as required courses to be certified to receive pay for these courses.

Student Signature: _____ **Date:** _____

State law requires that you be informed of the following: (1) with few exceptions, you are entitled on request to be informed about the information the University collects about you by use of this form; (2) under sections 552.021 and 552.023 of the Government Code, you are entitled to receive and review the information; and (3) under section 559.004 of the Government Code, you are entitled to have the University correct information about you that is incorrect.