

Phone: 706-542-1842 Email: va@uga.edu

Name:	Student ID #(811)	
My benefits chapter is (check one): Chapter 30 (MGIB-Active Duty) Chapter 31 (Vocational Rehabilitation) * 28-1905 is needed from VA Counselor Chapter 33 (Post 9/11) * Copy of Certificate of Eligibility needed Chapter 35 (Dependents Education Assist) Sponsor's VA File # Chapter 1606 (MGIB Select Reserve)	Start	Term: Fall 2022 Spring 2023 Summer 2023 Other
* Copy of NOBE needed (Notice of Basic Eligibility) I am a (check one): Veteran Please return with DD-214 I am a (check one): Freshman Student Transfer Student Returning Student Graduate Student	Spouse	Active Duty * Please return with proof of service
CERTIFICATION	INFORMATION	
I acknowledge and understand that I may only for my degree program. It is my responsibility to not change in my course load, in a timely manner, so that from a benefit-eligible class after the add/drop deadly required to repay any fees incurred. I am responsible terminations of enrollment. Students wishing to not a Veterans Education Benefits at UGA to stop and or responsible terminations.	ify the Veterans Educatify the Veterans Educatify the Venefits can be raine, and tuition/fees have for all debts resulting use their VA benefits for start benefits.	tion Benefits Office at UGA of any eassessed. If I add/drop/withdraw ave already been reported, I may be from reductions or or any given term must notify the
I acknowledge that I understand stud	<u>lent responsibilities l</u>	isted above.
STUDENT SIGNATURE	DATE	

^{*} Please do not email documents containing social security numbers. Any documents containing social security numbers must be sent via https://sendfiles.uga.edu/ and addressed to la74900@uga.edu.