



VETERANS EDUCATIONAL BENEFITS CONTACT INFORMATION

VA Certifying Official: Skylar Devlin, Assistant Registrar
Phone: 706-542-1842
Email Address: va@uga.edu

STUDENT INFORMATION

Last Name *	First Name *	Middle Name
UGA ID (81X) Number *	Contact Email Address *	

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)
- Chapter 1606 (MGIB Select Reserve) *Copy of NOBE needed (Notice of Basic Eligibility)

IF YOU SELECTED CHAPTER 35, PLEASE PROVIDE THE FOLLOWING:

Sponsor's VA File #	Sponsor's First & Last Name
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START TERM

Fall, Spring, Summer	Year
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I am a (check one):

- Veteran *Please return with DD-214
- Dependent
- Spouse
- Active Duty *Please return with proof of service

I am a (check one):

Freshman Student

Transfer Student

Returning Student

Graduate Student

CERTIFICATION INFORMATION

I acknowledge and understand that I may only be certified for classes that satisfy requirements for my degree program. It is my responsibility to notify the Veterans Education Benefits Office at UGA of any change in my course load, in a timely manner, so that my benefits can be reassessed. If I add/drop/withdraw from a benefit-eligible class after the add/drop deadline, and tuition/fees have already been reported, I may be required to repay any fees incurred. I am responsible for all debts resulting from reductions or terminations of enrollment. Students wishing to not use their VA benefits for any given term must notify the Veterans Education Benefits at UGA to stop and or restart benefits.

NOTE: By signing below, I acknowledge that I understand student responsibilities listed above.

Student Signature *

Date *

Revised January 2026