

Office of Veterans Services Class Certification Request

Name:	e: Social Security Number:				
Telephone:					
VA Benefit Chapter:	:				
☐ Chapter 30-Montgomery GI Bill		☐ Chapter 33-Post 9/11*see 2 nd page	☐ Chapter 35-Survivors/Dependents		
Chapter 31-Readiness & Employment		· · · · · · · · · · · · · · · · · · ·	□CVTG-State of Michigan Grant		
□ Chapter 1606-Selected Reserves*see 2 nd pag		^{2™} page □WAWF TA-Navy, Marines, Coast Guard	☐MING-STAP-Mich. Army/Air Ntl. Gr		
Student Status:					
	New Student (fir	st semester at SC4)			
	Current Student				
	_	nt (last attended SC4 more than 1 year ago)			
☐Guest Student from			(nan	ne of college/u	iniversity)
Name of Academic	Program				
		have filled out a request for multiple programs			
Course	Online	Explain if there is an In-person			Repeat
Name	(Y/N)	component for an Online Class		Credits	(Y/N)
Example: MTH 110 60	Y	4 Proctored Tests		4	N
	☐I have app	olied for graduation $\ \square$ Graduating this semeste	r	I	
Carefully read and s	-				
		nformed that as a person claiming benefits under Tit			
•		n through the college's Office of Veterans Services ar nges in my institutional status. I understand that onl	-		
	-	passing grade will be certified.	y courses ti	iat are required	i for fifty
а-В (-,					
	_	line, this completed form ${\bf must_be}$ returned to the O			-
	•	ompleted form to dhestand@sc4.edu.) You may cho	ose to com	olete the form ເ	ıp to the
signature line, print th					
*Student Signature:			Date:		
For office use only: Ev	al Completed	Aide Posted Certified in VAOnce		Invoiced in VAC	Once

Post-9/11 GI Bill® (Chapter 33) benefit requirements due to PL 116-315 Isakson & Roe Act of 2020

Each Chapter 33 student (or TOE student) must initial next to each statement below indicating the signing student understands their potential financial liabilities to the VA, the self-certifying monthly requirement, and potential financial liabilities to St. Clair County Community College. Section 1010. Verification of enrollment to receive Post-9/11 GI Bill® Educational Assistance benefits Creates a dual certification for the receipt of Post-9/11 GI Bill® benefits. The school will certify the student's enrollment after the add-drop date, and then each month thereafter, the student is required to electronically verify with VA their continued enrollment in that school. If a student fails to certify for two consecutive months, VA will withhold monthly housing allowance payments until the student certifies. Effective: August 1, 2021. If a student registers for a class but never attends, the SC4 School Certifying Official (SCO) will terminate the student's registered classes with the VA. The college (SC4) will then bill the student directly for the classes. Any money the student was sent by the VA for books and housing, the VA will require the student to return. Students have to call the Education Call Center (ECC) at (888) 442-4551 to self-certify that they are meeting the attendance requirement if they are unable to opt in to the text messaging system. Section 1019. Overpayments to eligible persons or Veterans This section adds a requirement that schools, and training programs be financially responsible, instead of the student, for benefits paid directly to an educational institution pursuant to the Post-9/11 GI Bill® for tuition and fees or the Yellow Ribbon program, and advance payments of initial educational assistance, without consideration of whether the overpayment was the result of the willful or negligent failure of the school. Effective: January 5, 2021. If a student stops attending or withdraws at any time during the semester, the SC4 SCO will reduce the student's registered hours or terminate the semester, whichever is appropriate. Any tuition funding that was sent to SC4 will be returned to the VA, and at that time the college (SC4) will bill the student directly for the amount that was returned to the VA. The student will be contacted by Debt Management to return any book or housing funds that were sent by the VA to the student. If this is the first time you've withdrawn from classes, provide a mitigating circumstance for the SCO to submit to the VA. ____ I understand benefits may be terminated by the VA for unsatisfactory conduct and/or academic conduct. I understand that this form must be completed each semester/term to receive benefits. ____ I understand that I, the student, am responsible for any and all charges not covered by the VA and must make arrangements with the school for payment by the due date, which in some cases may be at the time of registration. I understand that by submitting this request form, it is my responsibility as the student to keep track of my eligibility, and I verify that I am currently eligible for benefits. Should the VA deny my claim for any reason it will be my responsibility to make payment arrangements with the SC4 Business Office. **Chapter 1606 Benefit Students** I understand that if I receive CH 30: MGIB-Active Duty or CH 1606: MGIB Selected Reserve benefits, I will verify my attendance each month with the VA through W.A.V.E.: https://www.gibill.va.gov/wave/index.do *If your name is typed on the signature line, this completed form **must be returned** to the Office of Veterans Services via your @student.sc4.edu account. (Email the completed form to dhestand@sc4.edu.) You may choose to complete the form up to the signature line, print the form, sign it, then submit it.

For office use only: Eval Completed______ Aide Posted_____ Certified in VAOnce_____ Invoiced in VAOnce_____ updated 3-10-2022

*Student Signature: