

**THE UNIVERSITY OF NORTH CAROLINA AT ASHEVILLE
REQUEST FOR CERTIFICATION TO THE VETERANS ADMINISTRATION**

Name _____ Local Phone # _____
SID # _____ E-mail Address _____
Social Security # _____

File Name and Number (if different from above):

- Check Benefit Type:
- Montgomery GI Bill
 - Dependent
 - Post 9/11 GI Bill
 - Active Duty
 - Reserves
 - Vocational Rehabilitation

Mailing Address:

Birthdate _____

The Veterans Administration requires that you be certified in a degree program. You must officially declare your major no later than the first semester of your junior year. Prior to your official declaration, we must certify your attendance based on your intended major program. Please provide this information below.

Degree _____ Major _____ Concentration _____
2nd Major* (If applicable) _____ Concentration _____
Minor* (If applicable) _____

Is this your: Declared Major Intended major

*All majors and minors must be reasonably related to one career field to be payable under VA guidelines.

All students who are enrolled for 6 or more credit hours will receive a charge each semester for the UNC Asheville insurance coverage on their student account unless they have other coverage and request a waiver. Will you be requesting a waiver?

Yes No

For which terms do you wish to be certified to the VA:

August-December → Fall 20 _____	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
January-May → Spring 20 _____	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
June-July → Summer 20 _____	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time

******* Veteran's Affidavit *******

I understand that:

- a. I am not eligible to receive VA benefits if I withdraw from UNCA or if I do not attend classes;
- b. I will be responsible for any overpayment made to me by the VA if I withdraw from a course prior to the end of a term;
- c. Only courses meeting graduation requirements will be certified.

Signature _____ Date _____