

VA ENROLLMENT CERTIFICATION REQUEST

**MUST submit this form after registration to receive benefits for the next semester
FALL, SPRING, or SUMMER**

Chapter (circle one)

- 33 Post 9/11 Montgomery GI Bill
- 33YR Post 9/11 Montgomery GI Bill
- 35 Dependent or Spouse or Deceased or Disabled Veteran
- 31 Vocational Rehabilitation

Term/Year _____

Student Name _____

Social Security Number (last 4 digits) _____

Email Address _____

Current Mailing Address _____

Local Phone _____ Home Phone _____

Degree/Major _____

****If you have CHANGED your degree or major, you MUST notify the VA Coordinator.
***UNDECLARED major, you must declare a major by the beginning of your junior year.**

NOTICE: It is the student's responsibility to contact the VA Coordinator upon making any registration changes and changes to program of study.

Signature _____ Date _____

**SUBMIT this form EACH TERM to
Ms. Vicky Wilson
VA Coordinator
Registrar's Office
Administration Building
ywilson@presby.edu
864-833-8219**