



FLORIDA STATE UNIVERSITY
PANAMA CITY

Office of Student Affairs
Military & Veteran Benefits

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Request for Veteran Benefits

PERSONAL INFORMATION

Semester: _____ Year: _____ FSUSN: _____

Name: _____ SS#: _____
Last First MI

Mailing Address: _____

Address for mailing check or DD if direct deposit: _____

City/State/Zip: _____

Local or Cell Phone: _____ Other contact #: _____

FSU email: _____ DOB: _____

Degree Program: _____

Example: BA Undecided

Minor (must be required by degree program): _____

BENEFIT TYPE (SELECT ONLY ONE BENEFIT TYPE)

Post 9/11 GI Bill (check appropriate block below)

- I am a Veteran or Reservist who has served at least 90 days of Active Duty service for purposes other than training after 09/10/2001 and have included Member Copy 4 of my DD-214* (Chapter 33).
- I am Active Duty, have served at least 90 days of Active Duty service after 09/10/2001 and have consulted with my Education Officer* (Chapter 33 Active Duty)

Montgomery GI Bill (check appropriate block below)

- I am a Veteran and have included Member copy 4 of my DD-214 (Chapter 30)
- I am Active Duty and have consulted with my Education Officer (Chapter 30 Active Duty)
- I am an active Reservist and have included my NOBE (Chapter 1606)
- I am a Reservist who served active duty and has included Member Copy 4 of my DD-214 (Chapter 1607)
- I am a disabled veteran using Vocational Rehabilitation and have included a 22-1905 (Chapter 31)

In addition to my regular GI Bill I'm also eligible to receive: College Fund Education Kicker \$600 Buy-up None

- I am a dependent of a veteran who is deceased or 100% disabled (Chapter 35) (complete sponsor ID below)
- I am a spouse I am a child of a veteran Sponsor's SSN/VA File Number
- I am a dependent of a veteran who assigned a portion of their Post 9/11 GI Bill (Chapter 33) benefit to me*
- I am a spouse I am a child of a veteran Sponsor's SSN/VA File Number

***A VA Certificate of Eligibility is required before certification (22-1999) can be processed for Chapter 33**

APPLICATION COMPLETED

- I have completed a new application for VA Educational Benefits at www.gbill.va.gov
- I previously applied for VA Educational Benefits while previously attending FSU or attending another school. I authorize FSU to notify the VA Regional Processing Office that I have changed schools

SIGNATURE: _____ DATE: _____

DO NOT SUBMIT UNTIL AFTER REGISTRATION IS COMPLETE

Name: _____ Date: _____

REGISTRATION INFORMATION

Check appropriate status box:

- NEW STUDENT: (FSU is the first school that you are claiming VA Education Benefits)
- CONTINUING STUDENT: Received benefits at FSU last semester
- TRANSFER STUDENT: Used benefits at another school, must turn in a "Change of Program Form" (VA Form 22-1995 for Veterans or VA Form 22-5495 Survivors/Dependants)
- GUEST STUDENT: Receiving a degree at another school, must turn in a "Parent School Letter"
- I am registered for credit hours - Fall Semester
- I am registered for credit hours - Spring

Summer semester:

A (13 weeks) _____ credit hours
C (2nd 6 weeks) _____ credit hours
F (2nd 8 weeks) _____ credit hours

B (1st 6 weeks) _____ credit hours
D (1st 8 weeks) _____ credit hours

Please be advised. We have five summer sessions and many short courses. You should be aware of the Fact that the beginning and ending dates of each individual course will affect the amount of money the VA will send you for the month. The Department of Veterans Affairs will treat each course you are enrolled in as a separate unit with its own beginning and ending date. We will report these dates to the VA so they can determine what their regulations specify for your monthly pay. When a course ends, it is no longer counted by the VA as part of your enrollment regardless of which semester it is assigned to. This is independent of Florida State University policy.

Check any you have registered for this semester:

_____ Online Course _____ Correspondence Course _____ Directed Study _____ Independent Study

Changes in course enrollment after the last day to drop and add courses may result in the retroactive loss of benefits unless the VA finds mitigating circumstances involved in the change. Loss of benefits could revert back to the first day of term.

You will only be paid for those courses that meet degree requirements in the educational program on file with the FSU Office of Veterans Affairs.

Chapter 30, 1606, 1607 must verify continued enrollment at the end of each month of the semester by web or toll free number to receive payment of educational benefits. The site is [Http://www.gibill.va.gov/wave](http://www.gibill.va.gov/wave) or 1-877-823-2378.

Each term I must report my registration and any changes (drop/adds) in my enrollment to the campus Veterans Coordinator.

I must be enrolled in an approved program of study that leads to a standard degree and have all prior transcripts (official) on file at FSU by the end of my third quarter of enrollment. I understand I will not be paid by the VA for classes previously passed at FSU or other institutions.

I will insure that the classes I am taking are required in my program. I understand that I must make satisfactory progress toward graduation.

I understand that counselor advisemen/error is not an acceptable reason for taking classes not applicable to my program.

I give my permission for the school certifying official to review my education records. Completion of this form does not automatically defer your tuition.

I, the undersigned, have read the items above and understand them and will abide by them.

Signature

Date

Name: _____ Date: _____

INFORMATION FOR THOSE RECEIVING BENEFITS UNDER CHAPTER 33

Housing Allowance: The Chapter 33 housing allowance is not payable if:
you are registered for 6 credits or less
you are only registered for distance learning coursework
you are currently active duty

The housing allowance is paid based on the Tallahassee zip code (32306) - not on your home zip code.

Tuition and Fees: Chapter 33 will pay a percentage of your tuition and normal fees for courses that meet degree requirements in your educational program on file with the FSU Office of Veterans Affairs. The percentage is based on the time you spent on active duty after September 10, 2001. The percentage will vary from 40% to 100%

If you withdraw from or stop attending classes, you will be required to pay back the tuition and fees for those classes to the VA. DO NOT withdraw from any class or classes without talking to someone at the FSU Veterans Affairs Office regarding the amount you will have to pay back to the VA. If you have Federal Financial Aid you may also have obligations as well. For more information regarding Federal Financial Aid please contact Student Financial Services or Financial Aid.

You should be aware that the ultimate responsibility for the payment of tuition and fees is YOUR responsibility. You will not be allowed to register for or attend any further terms until all your financial obligations to the university for the current term are met.

FSU is responsible to refund the U.S. Veteran Affairs in the case where a student fails to attend one class day.

If a student attends at least one day of class and a refund is processed, it is the student's responsibility to refund the U.S. Veteran Affairs.

Book Stipend: The book stipend will be paid at the beginning of each term and will be based on your benefit percentage and the number of credit hours you are taking. Maximum payment is 24 credit hours in an academic year (fall through summer).

Conditions: In the event that the student is not eligible for the maximum eligibility, payment must be received by FSU within 30 days. It is the student's responsibility to make payment within the appropriate dates without regards for the University's billing procedures or postal delays.

If enrollment is terminated for any reason, the unpaid balance of tuition and fees is due and payable immediately.

A student who fails to make full payment of tuition and fees, including any incidental fees, by the due date may be prohibited from registering for classes until full payment is made.

By signing below, I understand my reporting and payment responsibilities under Chapter 33.

Signed: _____
Chapter 33 Only - Sign here and on the first page of this worksheet.