



## Military Benefits Authorization Form-Returning Students

Term: Fall\_\_\_ Spring\_\_\_ Summer\_\_\_ Year: 20\_\_\_

In order for the CSU Veterans Services office to certify and submit your schedule to the VA, we will need to receive a signed authorization each semester. If we do not receive a signed authorization, we will not be able to submit your schedule to the VA for payment.

Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_ SSN (last 4) \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_@csustudent.net

1. How many hours do you plan to take this term? \_\_\_\_\_
2. Has your major changed since using benefits last? If so, list what it changed to: \_\_\_\_\_
3. Same GI Bill® chapter as previous semester? \_\_\_\_\_ If not, what has it changed to? \_\_\_\_\_
  - a. Have you applied for the new benefit via [www.va.gov](http://www.va.gov)? \_\_\_\_\_
4. Will you be receiving any aid that will be applied to tuition only? (ex. Scholarships, athletic scholarships) \_\_\_\_\_
5. Will you be enrolled in another school while attending CSU? If so, list other school: \_\_\_\_\_
  - a. Contact info for VA rep at said school (name, email, phone#) \_\_\_\_\_

\* \_\_\_\_\_ I understand VA benefits are allowable for only those courses that are required for my declared degree program. CSU will not certify courses that are not part of my program of study and will adjust my certification as needed if my schedule changes.

\* \_\_\_\_\_ I understand that any schedule changes may result in me having a debt to CSU and/or VA.

*Department of Veterans Affairs Determines Eligibility of VA Education Benefits using Social Security Number per 38 U.S.C. 3471 Title38, United States Code*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please forward to [veterans@csuniv.edu](mailto:veterans@csuniv.edu) For any questions, please contact the office @ 843.863.8037