

***VETERANS AND DEPENDENTS REQUEST FOR CERTIFICATION***  
MUST BE COMPLETED EVERY SEMESTER

**Name** \_\_\_\_\_  
Last First Middle

**Address** \_\_\_\_\_  
 \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Student ID #** \_\_\_\_\_  
 Fall Spring Summer \_\_\_\_\_  
Circle One Year

**Home Phone** \_\_\_\_\_  
**Work Phone** \_\_\_\_\_

**OBJECTIVE:** *CHECK ONE*       Degree     Certificate     Transfer

**STATUS:** *CHECK ONE*       New                       Certified at FLC last semester  
     Transfer                       Returning VA student to FLC

Concurrently enrolled at another institution \_\_\_\_\_  
    \*\* Who is the parent institution? \_\_\_\_\_

**VETERAN'S CHAPTER:**    *CHECK ONE*       30     1606     1607     31

**DEPENDENT'S CHAPTER:**    *CHECK ONE*       35

**NOTE:** Students must have an Entrance Form and Prior Credit Report on file before the following courses will be certified. Students must also have an Education Plan on file prior to the end of the first semester.

**CLASS SCHEDULE:**

<u>Course</u>	<u>Class #</u>	<u>Units</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>Total Units Registered for Benefits</b>		_____

I understand that I must notify the VA certifying official IMMEDIATELY whenever I add or drop a class. I certify that I am not repeating any courses and all courses lead towards my education objective. Additionally, during the semester, the FLC VA certifying official will review my class periodically. If I am registered in a course which does not satisfy a GE requirement or education objective requirement, the certifying official will notify the VA and the VA will stop or reduce my benefits. I will also be required to repay any dollars I have received for the courses that are not required for completing my education objective. I also authorize the personnel in the FLC Admissions & Records office to give and receive information to the federal VA Office.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_