



Office of Veterans Affairs

Date: _____

Veterans Benefit Information Request for Certification Form

Semester to be certified:

Winter _____ Spring _____ Summer I _____ II _____ III _____ Fall _____

Semester Benefits:

- _____ Chapter 30, (MGI) _____ Chapter 1606/1607, (Reserve / National Guard)
- _____ Chapter 31, (MGI) _____ Military/Veteran Tuition Assistance
- _____ Chapter 33, (Post 9/11)) _____ GOARMYED
- _____ Chapter 35, (service connected dependent)

What is your major: _____

Have you changed your major since your last certification? **Yes** _____ **No** _____

Once your certification has been received you will receive an email confirmation when it has been processed. If you have not received a confirmation within seven business days, please contact the Certifying Official at: 718.262.5298 or email: leaton@york.cuny.edu

- Report any and all changes (drop/add) in your schedule or reduction of credit hours as soon as possible to the Office of Military and Veterans Services
- As a student at York College CUNY you acknowledge your responsibility to pay any remaining portions of your tuition/fees before the end of each term (if applicable) should there be any remaining balance on your student account.
- As a student at York College CUNY you understand that if you do not attend, or stop attending a class your VA benefit certification may be adjusted, meaning that you, the student, may incur a debt from the school, Department of Veterans Affairs, or both agencies

Name: _____

Email: _____

Phone: _____

EMPL ID: _____