

**UNIVERSITY OF SOUTHERN MAINE SCHOOL OF LAW**

**VETERANS SERVICES**

**Request For Certification**

This form must be completed and returned to Mainelaw Registrar's Office **30 days** prior to the beginning of **EACH** semester.

**Forms returned late may cause a delay in the payment of benefits. Inaccurate/incomplete information my cause delay or termination of your benefits.**

NAME \_\_\_\_\_

TELEPHONE \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ VA FILE NUMBER \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

\_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**VA Benefits Chapter (Check one):**

- CHAPTER 30** (Montgomery GI Bill)
- CHAPTER 33** (Post - 9/11 GI Bill)
- CHAPTER 35** (Survivors & Dependents)
- CHAPTER 1606** (Montgomery GI Bill - Sel Reserve or National Guard)
- CHAPTER 1607** (Reserve Education Assistance Program – REAP)

Are you currently on Active Duty? \_\_\_\_\_ YES \_\_\_\_\_ NO

Semester for Which Benefits are being Requested (Check One):

\_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer

Beginning and Ending dates for semester checked \_\_\_\_\_

Please List below the courses you are enrolled in for which you are requesting certification for VA Educational Benefits:

Course Code #	Course Title	Credits
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Student's Signature \_\_\_\_\_ Date \_\_\_\_\_