

Notre Dame of Maryland University
V.A. Educational Benefits - Declaration of Intent

Please notify the Veterans Affairs Representative in the Registrar's Office, of your desire to be certified for receipt of V.A. Educational Benefits for the _____ semester. By completing Part I, reading and initialing each item in Part II, and reading and signing Part III of this form. Failure to complete each item completely will prevent you from receiving benefits for the semester.

Part I: Personal Information

Name:

Last

First

Middle

Address:

Street

City

State

Zip Code

SSN:

D.O.B.

Home Phone:

Work Phone:

Email Address:

Are you the Qualify Veteran (Benefit Holder)? YES _____ NO _____

- **If you answered "YES" to the above question, please complete the below section:**

Are you current active duty military? YES _____ NO _____

Are you a reserve duty member of any US Armed Forces, including National Guard? YES _____ NO _____

- **If you answered "NO" to the above question, please complete the below section:**

Complete Name of Qualifying Veteran: _____

V.A. File Number/SSN: _____

Specify Degree Program: _____

Student Type: NEW _____ RETURNING _____ TRANSFER _____

OVER

Benefit Type (CHECK ONE):

- **New GI Bill (Chapter 106)** _____
 - **Montgomery Bill (Chapter 30)** _____
 - **VetVoeRehab (Chapter 31)** _____
 - **VEAP (Character 32)** _____
 - **Dependent (Chapter 35)** _____
 - **Post 9/11 (Chapter 33)** _____
- **Are you participating in the Yellow Ribbon Program? YES** _____ **NO** _____

PartII:Personal Responsibility for Receiving V.A. Benefits (Read and Initial)

- _____ 1. All Courses that are not successfully completed must be reported to the Veterans Administration. Any change in your registration, such as adding or dropping, must be reported to the V.A. Affairs Representative in the Registrar's Office. The Veteran will be given the opportunity to explain why he/she was unable to successfully complete the course(s). Based on this information, the V.A. will either accept the explanation and allow payment of benefits up to the date of drop, withdrawal, or failure, or terminate benefits for the course(s) effective the first day of the semester creating an overpayment.
- _____ 2. Class attendance must be on a regular basis. If you stop attending class, you must officially drop the course(s), and notify the VA Affairs Representative in the Registrar's Office of the change in status.
- _____ 3. You must maintain satisfactory academic progress toward the educational objective on your V.A. Application of Benefits.
- _____ 4. You must pursue the course work as outlined in the college catalog and as required by your department for your selective curriculum. This program must be the same as indicated to the V.A. on the application for benefits. Courses in which a veteran enrolls that are not listed in the catalog will not be certified for benefits.
- _____ 5. The V.A. will not pay for courses repeated unless the particular course is a graduation requirement, and was not passed the first time attempted.
- _____ 6. The V.A. will not pay for auditing courses.
- _____ 7. Credits by examination or for life experience will not be counted toward your enrollment for the receipt of V.A. benefits.
- _____ 8. You are permitted to take a maximum of five (5) credits per semester of independent study.

Part III:

I have read the above and I understand my personal responsibilities in claiming V.A. benefits. I realize that Notre Dame of Maryland University is responsible for communicating accurate enrollment data to the Veterans Administration and that any failure on my part to comply with the above conditions jeopardizes my continued receipt of V.A. educational benefits.

Signature: _____ **Date:** _____

**** This Form Must be Completed Each Semester Benefits are Requested ****

Notre Dame of Maryland
University
Registrar's Office
4701 North Charles Street
Baltimore, MD 21210
(410) 532-5327