

SEMESTER CERTIFIED: \_\_\_\_\_

Banner ID @ \_\_\_\_\_



**QVCC OFFICE OF VETERANS AFFAIRS**  
742 Upper Maple Street  
Danielson, CT 06239  
860-932-4114

### REQUEST OF VETERANS BENEFITS FORM

*Important Note: To continue benefits, this form must be completed every semester by the eligible veteran or dependent.*

\_\_\_\_\_  
Name Social Security # File# (if different from SS#)

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

\_\_\_\_\_  
City State Zip Change of Address:  YES  NO

\_\_\_\_\_  
Email Address @ Telephone # \_\_\_\_\_

**PLEASE NOTE:** All first time applicants must complete the **VA Form 22-1990 (Application for Educational Benefits)** by going to <https://benefits.va.gov/gibill/>.

**Check one of the following:**

- Montgomery GI Bill – **Chapter 30**
- Post 9/11 GI Bill – **Chapter 33**
- REAP - Select Reserve Educational Assistance – **Chapter 1606 of MGIB**
- VEAP – Reserve Educational Assistance Program (Activate on or after 9/11/2001) – **Chapter 1607**
- Survivors and Dependent Spouse/Child Education Assistance – **Chapter 35**
- Vocational Rehabilitation – **Chapter 31**

**Check one of the following if you are in the selected reserves:**

- Reservist
- National Guard

I AM REGISTERING FOR :

- FALL 20\_\_\_\_  SPRING 20\_\_\_\_  SUMMER 20\_\_\_\_ Semester Credit Hours: \_\_\_\_\_

**Degree or Certificate Program:** \_\_\_\_\_ If you attended a college other than QVCC or if you are changing your program from last semester, you must first receive approval from the VA by completing a *Request for Change of Program or Place of Training Form*. This must be done before QVCC can certify your registration for benefits.

**Continue on other side:**

## VETERANS ACCOUNTABILITY AGREEMENT

### To receive benefits the student must:

- Report to the QVCC Veterans Affairs Office each semester. Be sure that all courses that you have registered for are required for your **VA approved Program of Study**. You should meet with an advisor in the Student Success Center to determine that your courses meet this requirement.
- Have all official transcripts and/or a military transcript evaluation completed upon acceptance to the college. If not completed, the QVCC VA office will not be able to certify your benefits for the following semester. All applicable credits will be used toward your QVCC approved program of study. The VA does not pay for coursework previously earned at other colleges or in the military.
- Each semester, a Request of Veterans Benefit form and Accountability Agreement (bright green form) must be submitted to the QVCC Veterans Services office. Courses will not be certified with the VA if you do not submit the form.
- Inform the QVCC VA office of any credit, course, status, or program change. This includes switching classes or withdrawing.
- Understand that you may be liable for over-payments if you “withdraw” from a class or change to “audit”.
- Understand that academic probation or academic suspension is reported to the VA at the end of each semester and may result in terminated benefits.
- If you are on Chapter 30, Montgomery GI BILL, or Chapter 1606 or 1607, Guard/Reserves, you must sign into the VA website to verify your attendance via WAVE each month you are attending school to have them release your payment. This is in **addition** to the Monthly Certification of Attendance with QVCC.
- You must complete a Monthly Certification of Attendance Form (MCF) (bright orange form) twice during each semester (See Below). Pick up form at the QVCC VA office in the Student Affairs office suite, at the Front Desk in the Willimantic Center, or download from the QVCC website (<https://qvcc.edu/student-resources-2/veterans/veterans-forms/>). If you have an online class, please ask that your instructor send an email to [AHill@qvcc.edu](mailto:AHill@qvcc.edu) to verify you are up to date with all coursework.
- Submit MCF by 15<sup>th</sup> of the Month on:
  - Fall Semester: October and November
  - Spring Semester: February and April
  - Summer Sessions: Mid way through session.

***I have read the above and fully understand the terms of eligibility for my GI Bill education program.***

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**Legal Signature**

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**Date**