



REQUEST FOR CERTIFICATION OF ENROLLMENT

Fill this form out completely and submit via fax, email or in person to the Office of Financial Aid/Veteran Affairs.

Name: _____ Coastal Alabama ID: A _____
Last Name First Name Middle Name

Student Email: _____@coastalalabama.edu _____
Academic Program Phone

Circle Campus: Atmore Bay Minette Brewton Fairhope Gilbertown Gulf Shores Monroeville Thomasville

Please indicate semester and year you wish certified. _____ Fall _____ Spring _____ Summer Year 20_____

MILITARY INFORMATION – BENEFIT CHAPTER:

____ Ch. 30-Montgomery GI Bill Active Duty ____ Ch. 1606-Montgomery Reserve ____ Tuition Assistance
 ____ Ch. 33-Post 911 ____ Ch. 1607 Reserve Education Assistance Program
 ____ CH 31-Disabled Veteran/Vocational Rehabilitation; Case Manager’s Name: _____
 ____ Ch. 35-Fed Dependent Education Assist; Veteran’s SSN _____ ____ Alabama Dependent Scholarship

ARE YOU RECEIVING ANY ADDITIONAL AID – scholarships, waivers, PACT, or employer based? If so, list below:

List Registered Courses for Certification: Course Name, Number and Credit Hours (e.g MTH 101 3 CR HRS)

List only courses that apply towards your degree or certificate program.

Course Prefix and Number (MTH 099)	Course Title – (ex. Math)	Credit Hrs.	On Campus/Online

Initial Each Line to Indicate That You Have Read and Understand Your Responsibilities

- ____ I must complete a new Request for Enrollment Certification form each semester that I wish to use my VA Benefits.
- ____ I understand that my veteran education benefits will only pay for coursework required as part of my program of study (free electives are included in required coursework) and will be responsible for any expense the veteran education benefits do not cover. VA will NOT pay for online remedial courses.
- ____ I will report ALL adds/drops/withdrawals/class cancellations, changes of major/program, or if I step attending any of my classes to the VA School Certifying Official immediately.
- ____ I understand that I must review my degree plan every semester before I register to make sure I am only taking classes that are required to complete my degree.
- ____ I understand that the initial processing of my VA Benefits Application and Certification of Enrollment generally take approximately 4 – 6 weeks to complete.
- ____ I understand that certification will be done as soon as possible following receipt of all required paperwork. I further understand that the initial certification will be received and amended if needed after the semester adjustment period.
- ____ The School Certifying Official will release grades and/or transcripts to the VA as needed.
- ____ Benefits cannot be received for a class if a passing grade was previously received regardless of where the class was taken.
- ____ Mini-semester courses may result in a reduction in training time if both mini-terms do not equal the same number of credit hours.

Terms and Conditions:

By signing this form, I am requesting certification for VA Educational Benefits for the courses listed above in the semester indicated. I understand that changes to my schedule could put me in the debt situation with VA or Coastal Alabama. Regardless of anticipated benefit payments, I accept responsibility for my balance as agreed to the terms and conditions at the time of registration. I certify all information provided is correct and true to the best of my knowledge.

 Student’s Signature (no electronic signature, must be original)

 Date