

## Military & Veteran Student Information Sheet

**Directions:** Please read the form carefully and **print** your answers. Return completed form to the SCO.

### STUDENT INFORMATION

Student Name: \_\_\_\_\_  
 Student SSN: \_\_\_\_\_ Student ID: P000 \_\_\_\_\_  
 VA File Number: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_  
 Email: \_\_\_\_\_ Branch of Service: \_\_\_\_\_  
 Degree Goal: \_\_\_\_\_ Dates of Service: \_\_\_\_\_  
 My first term at NCMC will be: Fall 20\_\_ Spring 20\_\_ Summer 20\_\_

### BENEFIT INFORMATION

#### Which Veteran Benefit will you be using?

- Chapter 30 (MGIB – Active Duty)
- Chapter 31 (Voc. Rehab.)
- Chapter 32 (Vietnam Era)
- Chapter 33 (Post 9/11)
- Chapter 35 (Dependent/Survivor)
- Chapter 1606 (MGIB – Selected Reserves)
- Chapter 1607 (REAP)
- Federal Tuition Assistance (GOARMYed)
- State Tuition Assistance
- Missouri Returning Heroes (*Must complete separate MO RH application for waiver.*)

#### Please circle your answers below.

Have you attended NCMC previously? Yes No

If yes, did you use your VA benefits? Yes No

Have you attended another school? Yes No

If yes, did you use your VA benefits? Yes No

Please list all schools attended since high school:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Prior earned college credits: \_\_\_\_\_

Degree Earned: No Yes: \_\_\_\_\_

### IMPORTANT INFORMATION! PLEASE READ CAREFULLY.

It is the responsibility of each student to verify attendance by the 5<sup>th</sup> day of each month by emailing **Veterans@mail.ncmissouri.edu**. Failing to verify attendance could result in changes to your VA benefit.

It is the responsibility of the student to immediately report any changes in their schedule by emailing **Veterans@mail.ncmissouri.edu**. Any changes will be appropriately reported to the VA office. If you do not maintain a level of satisfactory academic progress toward a college degree, your VA eligibility could be terminated.

I hereby certify that the facts stated above are true and correct to the best of my knowledge and I understand my responsibilities as a Veteran student.

### SIGNATURE

Student: \_\_\_\_\_ Date: \_\_\_\_\_