

**LMC VETERAN'S ENROLLMENT CERTIFICATION REQUEST AND CHANGE NOTIFICATION**

(PRINT) Last Name      First Name      M.I.      SSN or Student ID#      Home Phone #      Work/Alternative Phone #

Mailing Address: Street Address      City      Zip Code      E-mail Address

**VA EDUCATIONAL BENEFIT APPLYING FOR:**

- Chapter 33** - The Post 9/11 GI Bill
- Chapter 30** – Active Duty (MGIB) – Service beginning after 06/30/85
- Chapter 1606** - Selected Reserve
- Chapter 1607** – (REAP – Reserve Educational Assistance Program)

**VRAP**

**Chapter 31** (Vocational Rehabilitation)

**Chapter 35** (Survivors'/Dependents' Educational Assistance)

Veteran's Name: \_\_\_\_\_

SSN #: \_\_\_\_\_ Claim #: \_\_\_\_\_

**List All Colleges previously attended: (Include for first semester of attendance or if you are changing your major and/or educational goals)**

	TRNX Req.	Received	<input type="checkbox"/> A.A.	<input type="checkbox"/> A.S.	<input type="checkbox"/> Cert.	MAJOR: _____
1. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> B.A.	<input type="checkbox"/> B.S.		
2. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> TRANSFER MAJOR:			_____
3. _____	<input type="checkbox"/>	<input type="checkbox"/>				INTENDED TRANSFER SCHOOL: _____

**IMPORTANT! List exact session dates under the "Course Dates" column below.**

TERM _____ Course Name & Sect. #	# Units	Course Dates	√ if on Ed plan	TERM _____ Course Name & Sect. #	# Units	Course Dates	√ if on Ed plan

TOTAL UNITS:

**PLEASE READ BEFORE SIGNING:** I understand that I must REQUEST CERTIFICATION OF ENROLLMENT by listing the courses I am registered for EACH SEMESTER with the Los Medanos College Veterans Education Representative. I understand that I must promptly notify the Los Medanos Veterans Education Representative of any changes in unit status, courses, grades, academic objective, withdrawals, and address. Failing to do so may result in an overpayment of benefits which need to be repaid to the VA. Further, I certify that I have indicated the inclusive dates of any short-term courses above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_