



Verification of Veterans Education Benefits 09-10

Office of Financial Aid
 1665 Hampshire Pike, Columbia, TN 38401
 (931) 540-8267 | (931) 540-2793 fax

Student's Name: _____ CoSCC ID A _____
 First, MI, Last

SECTION A: Expected Veterans Education Benefits for the 2009-2010 Academic Year

On the FAFSA, you marked that you will be receiving some form of Veterans Education Benefits for the 2009-2010 academic year. This form must be completed and returned to the Financial Aid Office before your financial aid eligibility can be determined.

Type of Veterans Education Benefits	Amount Per Month	How Many Months?	Benefit End Date, If in 2009-2010
1. Chapter 30: Active Duty	\$		
2. Chapter 33: Post 9/11 GI Bill	\$		
3. Chapter 1606: Selected Reserve (Montgomery GI Bill)	\$		
4. Chapter 1607: Reserve Educational Assistance Program	\$		
5. Chapter 31: Vocational Rehabilitation and Employment	\$		
6. Chapter 35: Dependents' Educational Assistance	\$		
7. Other (please specify): _____ _____	\$		

Note: It is recommended that eligible students complete initial or renewal paperwork with the Veterans Affairs representative in the Financial Aid Office as soon as possible.

SECTION B: Not Receiving Veterans Education Benefits

If you marked the FAFSA incorrectly and will not be receiving Veterans Educations Benefits, check the reason below:

- My benefits have expired as of (print date): _____
- I am not applying for benefits.
- I am not eligible for benefits because: _____

SECTION C: Certification Statement and Signature

I certify that the information provided on this form is correct to the best of my knowledge. I will provide additional proof if requested by the Financial Aid Office. I understand that if I purposely provide false or misleading information on this form, I may be subject to fines and/or imprisonment. I understand that the information provided may be verified with the Veterans Affairs Office at CoSCC.

Signature: _____ Date: _____