

APU ID # _____ - _____ - _____ Social Security Number _____ - _____ - _____
 (If known)

Student Name _____
Last First Middle Initial

Phone (____) _____ - _____ (____) _____ - _____
Home Number Work Number Email Address

You are required to complete this form because you indicated that you are receiving a VA education benefit during the 2009-2010 award year. The total amount of the benefit you receive for your attendance during this award year must be considered a resource when determining your total financial aid package. The Montgomery GI Bill – *Regular Active Duty* (Ch. 30), including any additional Department of Defense (DoD) contribution (kicker), does not count as a resource towards subsidized Stafford student loan eligibility.

A) Which VA education benefit program(s) are you receiving this award year? (mark all that apply)

<input type="checkbox"/>	None (If you indicated a benefit in error or are not going to request that your enrollment be certified at all this award year, stop here and skip to signature and date section.)
<input type="checkbox"/>	Montgomery GI Bill – <i>Regular Active Duty</i> Educational Assistance (Chapter 30)
<input type="checkbox"/>	Montgomery GI Bill – Selected Reserve Educational Assistance (Chapter 1606)
<input type="checkbox"/>	Veteran’s Survivors and Dependents Educational Assistance (Chapter 35)
<input type="checkbox"/>	Disabled Veterans Vocational Rehabilitation and Employment (Chapter 31)
<input type="checkbox"/>	Post-Vietnam Era Veterans Educational Assistance (Chapter 32) <i>a.k.a. contributory VEAP</i>
<input type="checkbox"/>	Other: _____ (<i>e.g., Section 903, 901, REPS, etc.</i>)

B) For Chapters 30, 1606, and 32, do you qualify for any additional DoD kicker(s)? YES NO

C) List the total (not monthly) VA Benefit amount you will receive for each term of enrollment listed below; be sure to include any additional DoD kicker(s):

Summer 2009: \$ _____
 Fall 2009: \$ _____
 Spring 2010: \$ _____
 Summer 2010: \$ _____

I hereby certify that all of the information provided on this form is true and complete to the best of my knowledge.

Student Signature _____/_____/_____
Date

MAILING ADDRESS
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