

NLTCC VA BENEFITS ENROLLMENT VERIFICATION FORM

Chapter	

	_	ation Semester gSummer 20			
Are you Active Duty		Are you a resident of Louisiana?YesNo			
The your neare buty		tional Guard?YesNo			
		form to: NLTCC Financial Aid Office			
NAME		VA File No(_			
		Student's SSN			
CITY/STATE/ZIP		Home Phone			
Work Phone	Cell Phone	Email Address			
	SELECT ONE F	ROM THE FOLLOWING			
_First Time-Using GI		rst time (Certificate of Eligibility required)			
Continuing - Enrolle	_Continuing - Enrolled at NLTCC in previous semester using GI Bill Benefits				
_Visiting - Attending	NLTCC while pursuing degree a	t another school SCO Notes			
	ol Approval is required, ask SCO for de				
_	Jsed GI Bill Benefits at another				
(Notify VA of c	hange in Parent School at the <u>G</u>	GI Bill website - www.gibill.va.gov)			
RE	EAD THE FOLLOWING IMPORTA	ANT NOTES			
> This form must be	completed with your instructor's s	ignature each semester that you attend NLTCC in order for you to			
certified for your b	enefits. If you add a class, drop a c	lass, or any changes have been made to your original schedule, yo			
must notify the fina	ancial aid office in order to adjust	your certification with the VA. Failure to do this step may result in			
debt owed to the s					
	·	dent Services concerning academic probation and suspension to i			
=	ng satisfactory academic progress.				
		ot count toward your degree program except for developmental oved for payment under the GI Bill by the VA.			
		oved for payment under the GI Bill by the VA.			
	irse section or approved prerequis				
•		ness office prior to the semester starting if your benefit does not s			
tuition and fees dir	ectly to the campus from the VA.	Please check your benefit type for its policies and procedures.			
No book vouchers	will be issued to GI Bill recipients.	Book vouchers will only be issued if you are receiving additional a			
that qualifies you f					
•	·	ide a Certificate of Eligibility to the School Certifying Official in the			
Financial Aid Office	in order to certify enrollment.				
	nowledge that I have read and spossible to the best of my kn	l understand the above statements and that I have comple			
	possible to the sest of my kill				
dent's Signature		Today's Date			
dent ID/LOLA #					
	-				

VA CHAPTER (MARK ONLY ONE)

Chapter 35 – DEA Deper Chapter 1606 – Reserve Chapter 1607 – REAP Res VRAP –Veterans Retrain	nal Rehabilit /11 GI Bill (cendent's Educa GI Bill serve GI Bill (ing Assistanc	ertificate of Eligibility required) ational Benefits Activated for 90 consecut te Program TO BE COMPLETED BY NI	LA ive days afte		e Exemption			
REQUIRED COURSES (Courses Required for Degree Program (R.S. 14:72.1)								
Only approved classes that apply toward the degree of study to include prerequisites.								
Degree of Study								
Course Prefix & Number	Inst Initials	Course Prefix & Number	Inst Initials	Course Prefix & Number	Inst Initials			
7	HE VA WILL	DEVELOPMENTAL CO NOT PAY FOR ONLINE DE		AL CLASSES				
Course Prefix & Number	Inst Initials	Course Prefix & Number	Inst Initials	Course Prefix & Number	Inst Initials			
INSTRUCTOR COMMENTS								
INSTRUCTOR VERIFICATION The classes listed above are required academic catalog for NLTCC. I certify to the best of my knowledge applies to this student. Instructor's Signature			n and that all ir					
monucion o orginalure			U	a.c				