



Return completed form to:
New River Community and Technical College
Attention: Donna Lewis
653 Church Street
Lewisburg WV 24901
Email: dlewis@newriver.edu

VA CERTIFICATION OF ENROLLMENT FORM

REQUIRED TO BE COMPLETED **EACH SEMESTER** AFTER REGISTRATION FOR COURSES BY STUDENTS ELIGIBLE TO RECEIVE VA EDUCATIONAL BENEFITS BEFORE ENROLLMENT CAN BE CERTIFIED WITH THE VETERANS BENEFIT ADMINISTRATION

Applying for VA Educational Benefits under:

- Montgomery GI Bill—Selected Reserves/ Ch. 1606
- Montgomery GI Bill/ Ch. 30
- VA Vocational Rehab/Ch. 31
- POST 9/11/Ch. 33
- Dependent/Spouse of Disabled Veterans/ Ch. 35

Name: _____
First Name MI Last Name

Phone: _____ Email: _____

Location:

- Advanced Technology Center, Ghent
- Greenbrier Valley Campus, Lewisburg
- Mercer County Campus, Princeton
- Nicholas County Campus, Summersville
- Raleigh County Campus, Beaver

Degree presently working on _____
Major

Indicate the term and hours for which you are enrolling. All courses must be required for your major to be certified with VA.

Fall _____ **Hours:** _____ **Spring** _____ **Hours:** _____

Summer _____ **Hours:** _____ **Summer** _____ **Hours:** _____

To be entitled to VA Benefits you must be pursuing your program of study or training and must be making satisfactory progress toward completion of your educational goal as stated on your latest application with the Veterans Benefit Administration.

“I understand that any changes in my educational status (i.e. failure to attend or participate in classes, a drop in credit hours, change of program or major, grade changes, withdrawal from school, retroactive withdrawals, academic probation or suspension) may cause overpayments that will be due from the veteran. I understand that any changes must be reported to New River CTC’s Veterans Certifying Official within seven (7) days of the change. Failure to report changes could jeopardize future enrollment certifications. I understand that I am NOT eligible for any payments under any VA program for credit hours not required for my degree.”

I understand that I will be obligated to pay tuition and fee costs not covered by my VA Educational Benefits.

_____ _____ _____
Date Signature (DO NOT PRINT) Student ID Number