

Military & Veterans Semester Enrollment Form

You must complete this certification form each semester. Your VA benefits will only be based on courses that are required for your curriculum as outlined in the University Catalog. If you change your schedule, you must submit a UBalt VA Change of Schedule Form to our office. If you change your program, you must submit a VA Change of Program or Place of Training form to our office.

Name: _____ Last 4 of SSN#: _____

Street Address: _____ UBalt Student ID#: _____

City, State, Zip: _____ Phone#: _____

Semester: ☐ Fall ☐ Spring ☐ Summer Year: _____

Are you currently on active duty? ☐ Yes ☐ No

Are you a new VA student to UBalt? ☐ Yes ☐ No

Are you receiving other federal assistance? ☐ Yes ☐ No

Have you received VA Benefits at another school or training location? ☐ Yes ☐ No

Learn how to apply for Veteran's Educational Benefits here: <https://www.va.gov/education/how-to-apply/>

If Chapter 31: The Dept. of Veteran Affairs Rehabilitation Counselor must provide you with form 22-1905, Authorization and Certification of Entrance or Re-entrance into Rehabilitation and Certification of Status. UBalt must have a copy from Department of Veteran Affairs on file.

Select your benefit type:

☐ G.I. Bill® (Chapter 30) ☐ Voc Rehab (Chapter 31) ☐ Post 9/11 (Chapter 33)
☐ Dependant/Survivor (Chapter 35) ☐ Selected Reserve (Chapter 1606) ☐ REAP (Chapter 1607)

After you have completed registration, please list your courses for this semester.

Program/Major: _____

Dept/Course	Course Title	# of credits	Start Date
HIST 434	American Constitutional History	3	08/27/2019

By signing below, I certify I have read all the information on this form and all my information is correct.

Signature: _____ Date: _____