



## Student Veteran's Certification Worksheet

Please print clearly. The information listed on this form will be used to certify your enrollment for the semester indicated below. If you will be submitting this form via email, please include the words "[PC-Encrypt]" in the subject line to ensure that your message is sent securely.

Name \_\_\_\_\_

VA File Number \_\_\_\_\_

Social Security Number \_\_\_\_\_

School Code UG, Grad, SCE \_\_\_\_\_

Banner ID # \_\_\_\_\_

**Eligibility Status – Please check your current status (select one only):**

CHAPTER 30 Veteran/Active Duty    
  CHAPTER 31 Vocational Rehabilitation    
  CHAPTER 35 Veteran's Spouse/Dependent    
  CHAPTER 1606 National Guard/Reserves    
  CHAPTER 1607 Reservist Activated

CHAPTER 33\* . . . . . Please indicate the percentage of entitlement the VA approved for CHAPTER 33: \_\_\_\_\_ %

Army Tuition Assistance     \*Post 9/11 GI Bill® For Chapter 33, are you a Veteran's Spouse/Dependent:  YES  NO

**Mailing Address: Please note, it is your responsibility to inform the college and the VA of any address change**

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Providence College email address \_\_\_\_\_

**Certification Semester: (A separate worksheet must be submitted for each semester).**

Please check the current semester for enrollment:	
I wish to be certified for the Fall semester:	<input type="checkbox"/> Year _____
I wish to be certified for the Winter Inter-session:	<input type="checkbox"/> Year _____
I wish to be certified for the Spring semester:	<input type="checkbox"/> Year _____
I wish to be certified for the Summer 1:	<input type="checkbox"/> Year _____
I wish to be certified for the Summer 2:	<input type="checkbox"/> Year _____

**Important Information:**

- Please be advised the Department of Veterans Affairs (VA) will only compensate for courses that apply to a student's certificate or degree program. Students should meet with an academic advisor to select courses and should inform the advisor that they are receiving VA benefits. For any change in status, please notify Yvonne Arruda at 401-865-1033.
- Online courses: The student must be registered for at least one on campus course, in order to receive the full MHA Rate.
- The Providence College Certifying Officials will not certify students for courses that are not part of their program. Certificate of Eligibility (COE) – PC requires an up-to-date COE to be submitted to the Office of the Registrar. For additional information regarding the Certification Process, please contact Yvonne Arruda at 401-865-1033 or yarruda@providence.edu.

**Please Sign: I attest that the information above is true and accurate; and I understand that I am responsible for any unpaid balance that the VA does not cover.**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

*GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S. government Web site at <https://www.benefits.va.gov/gibill>.*