

VA Benefit Coding Request

STUDENT ID	LAST NAME	FIRST NAME

Semester: _____ Year: _____

Benefit Utilizing (Check One):

- | | |
|--|--|
| <input type="checkbox"/> Chapter 33: Post 9/11 | Chapter 35: Dependent Education Assistance Chapter |
| <input type="checkbox"/> Chapter 33D: Post 9/11 (Dependent) | 1606: Montgomery – Selected Reserves Veterans Priority |
| <input type="checkbox"/> Chapter 30: Montgomery | Active Duty Enlisted |
| <input type="checkbox"/> Chapter 31: Veterans Readiness & Employment | Veterans Priority Registration for Enrollment (ONLY) |

This is your indication that, to the best of your knowledge, you are eligible for the above benefit and that you intend to use the benefit for this semester. If you choose to not use this benefit for this term or if you switch benefits, it is your responsibility to notify the Veterans Resource Center. If you do not use the benefit, you will be subject to the decoding of your account.

Please read and initial the following:

_____ I am responsible for paying all tuition and fees not covered by my VA Education Benefits. Failure to do so may result in enrollment blocking and any balance due may be sent to a collections agency.

_____ For CH 1606 and CH 30 recipients, tuition and fees are not covered by the VA. Fees are due at the time of class registration. I may be dropped within 10 days of registration if tuition and fees are not paid.

_____ If I stop using my VA Education Benefits, my coding may be deactivated. Once deactivated, tuition and fees will be due at the time of registration. I may be dropped within 10 days of registration if tuition and fees are not paid. To re-establish my coding I will need to complete this request again with the Palomar Veterans Resource Center.

_____ **I understand that this request does not initiate my VA Education Benefits at Palomar College.** To start my benefits, I must complete the New Student Checklist provided by the Palomar College Veterans Resource Center and any additional paperwork required at the time of certification.

For a typed signature to be accepted, this request **MUST** be sent from your Palomar Student e-mail address. Once completed, save the file with your last name and student ID as the name (e.g. smith123456789) and email to veterans@palomar.edu titled "Coding Request" in the subject line.

Signature: _____

Date: _____

Received by	Initial	Date
VRC		

Certifying	Initial	Date
Official		