

Veterans Educational Benefit (VA) Agreement Form

| UNIVERSITY | Term Requested: | | Academic Year: |
|-----------------------------|-----------------|----------------|----------------|
| Name: | | MBU ID Number: | |
| Mailing Address: | | | |
| Email Address: | | | |
| Degree/Major: | | Phone #: | |
| VA Benefit Type: | | | |
| Are you currently on active | duty? Yes | No | |
| Is this a change of major? | Yes | No | |

If yes, attach VA Form 22-1995 (for veterans) or VA Form 22-5495 (for dependents or spouses)

If this is your first semester at MBU, please attach a complete copy of your certificate of eligibility if

you have not already provided it.

- <u>For your advisor/information</u>: students pursuing a bachelor's degree may not have to declare a major before their junior year at some schools. If a freshman or sophomore hasn't declared a major, report the student's program as "Bachelor (undeclared)". The student cannot be certified beyond his or her sophomore year unless a major is declared. Only "General Education" courses can be certified prior to the declaration of a major.
- By signing below, I understand that I will not receive benefits for courses in which I have previously earned credit and will not receive benefits for courses that do not apply toward general education requirements or degree completion in my chosen major.
- Additionally, I have met with my advisor and we have declared that all the courses I am registered for indicated in the term above will count toward general education requirements or my degree.
- Further, I understand that I am responsible for reporting all adds, drops, and changes to my initial enrollment to the Mary Baldwin University VA certifying official, who will subsequently report the change to the VA. I must contact the VA every month to verify my continued enrollment.
- I also understand that I may owe money to the school or be subject to REPAYMENT when my enrollment is misrepresented and all changes are not fully disclosed and reported to the VA.

Student signature: _____

Advisor signature: _____

* Advisor must sign before the form is returned to the Financial Aid Office. Please only send completed forms to the Financial Aid Office.

Date: _____