



# Request for Certification of Enrollment to VA

To request certification of your enrollment to the VA for your education benefits, email this completed form to [vabenefits@kennesaw.edu](mailto:vabenefits@kennesaw.edu) from your **KSU student email**.

- If this is your first time using benefits at KSU, you must first complete our [Intake process](#).
- Request forms are processed in the order received and must be fully completed and signed.
- Submit this form only once per semester when you are ready for the School Certifying Officials to submit your early/initial enrollment certification to the VA for the upcoming semester.
- I acknowledge the following (please initial):
  - \_\_\_\_\_ I have registered for classes and my schedule is \*mostly\* set for the upcoming semester.
  - \_\_\_\_\_ I have verified all classes meet degree requirements (Degree Works) and understand that classes not required for my degree will not be certified, nor will repeats of degree-satisfying grades.
  - \_\_\_\_\_ Any changes I make to my schedule after I submit this request form (RFC) will be reviewed/certified after drop/add ends; changes will not be reflected on my first VA payment of the term.

Select only one semester per request form.

Semester and Year Requesting Certification:      Fall      Spring      Summer      Year: \_\_\_\_\_

Name: \_\_\_\_\_ Student Type:      Undergraduate      Graduate

Student ID #: \_\_\_\_\_ Beneficiary Type:      Veteran/Active      Dependent

**Benefit Chapter that I am requesting to receive benefits under:**

*Please reference what is listed on your Certificate of Eligibility from the VA (does not apply to Ch. 31 VR&E)*

Post-9/11 (Chapter 33) - Includes Transfer of Entitlement, STEM scholarship, & Fry Scholarship

MGIB-AD (Chapter 30) Active Duty

MGIB-SR (Chapter 1606) Selected Reserves

VR&E (Chapter 31) - VR&E Counselor Name: \_\_\_\_\_

Dependents' Educational Assistance (Chapter 35/DEA)

**Is this a change in benefit chapter from your previous certification/benefit use at KSU?**      Yes      No

If yes, you must also include (attach) a copy of your Certificate of Eligibility for the new benefit with this request or, if changing to Ch. 31 VR&E, an authorization must be submitted by your VR&E Counselor.

**Please visit the links in blue below and initial that you have reviewed the benefit information:**

\_\_\_\_\_ (initial) I've read the Benefit Review email sent to me by my School Certifying Official (upon initial intake) and the [Benefit](#) information on the website for my requested benefit chapter.

\_\_\_\_\_ (initial) I've reviewed the [VA Students' Responsibilities](#) information and the [Certified Hours](#) (full-time hours) information.

I have reviewed the information above, understand how my benefit works, and am aware of my payment responsibilities. I understand that only classes required for my degree will be certified. I understand that I am responsible for confirming that all payments due the university are paid. I am also responsible to reimburse the VA for any overpayment made by the VA.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email this completed and signed form to [vabenefits@kennesaw.edu](mailto:vabenefits@kennesaw.edu) from your **KSU student email**.