

Veterans/Dependents – VA Educational Benefits – Intake Form

NAME:ADDRESS:			STUDENT ID #:		
				ACT PHONE #:	
EMAIL ADDRESS:					
Ch 30 Montgomery G	I Bill ™	Ch 31 Vocational	Rehabilitation	□ Ch 33 Post 9/11 GI Bill ™	
□ Ch 1606 Selected Reserve		Ch 35 Dependent,	Dependent/Survivors	□ Ch 33 -TOE (transfer of entitlement)	
<i>Current Objective</i> – Plea certificate program offer				onal plan. It must be a degree or se select one below:	
□ AA or AS Degree M	ajor:		_		
□ Transfer program M	ajor:		Transf	er Institution:	
□ Certificate M	ajor:				
Official Transcripts – Off prior to VA education pla		•	-	niversities attended MUST be on file anscripts).	
YES, I attended and h College Attended		i <mark>pts from other colle</mark> A <u>ttended</u>	ges outside of L	os Rios, as listed below: Received in Office (Staff Use)	
□ NO, I did not attend	and do not l	have transcripts from	other colleges	outside of Los Rios.	
I understand that my VA or incomplete.	educationa	l benefits may be affe	ected if any info	rmation provide to FLC is inaccurate	
Student's Signature			Date	_	
OFFICE USE ONLY:					
□ VA Application (VA form	ı 1990, 5490,	1995 or 5495)			
□ FLC VA Statement of Stu	udent Unders	standing form			
DD-214 (member 4 cop	y) - not requ	ired for chapter 35 or ch	napter 33-TOE		
VA Educational Plan		Appointment	scheduled:	/ /	
I FLC VA Request for Certification form (ONLINE - must be completed EVERY semester)					
□ Certificate of Eligibility (COE) letter				
□ For Chapter 35: Vetera					
			Dependent #	<u> </u>	
DND posted for Chapter	: 33, 33-TOE :	and 31 only			