



VA ENROLLMENT CERTIFICATION REQUEST

1. STUDENT ID	2. UNIVERSITY LOCATION <input type="checkbox"/> SA <input type="checkbox"/> HOU <input type="checkbox"/> RGV <input type="checkbox"/> OL	3. DATE OF REQUEST
4. STUDENT NAME (LAST, FIRST, MI)	5. OLLU EMAIL	6. DATE OF BIRTH
7. PRIMARY STREET ADDRESS	8. CITY	9. STATE
		10. ZIP
11. PRIMARY PHONE	12. EMERGENCY CONTACT PHONE	13. CHANGE OF ADDRESS? <input type="checkbox"/> YES <input type="checkbox"/> NO
14. SOCIAL SECURITY NUMBER	15. DEGREE <input type="checkbox"/> CERTIFICATE <input type="checkbox"/> BA <input type="checkbox"/> BS <input type="checkbox"/> MA <input type="checkbox"/> MS <input type="checkbox"/> PHD	16. MAJOR

**** IMPORTANT NOTE **** Students must enroll for the certification process to begin. Courses listed for payment must be part of your current degree program. Students must notify the School Certifying Official of any changes to enrollment status (Add/Drop/Withdraw), failure to do so may result in over-payments and/or debts to the university or VA, which the student assumes FULL responsibility. Once received your enrollment will be reported to the VA in the order that it was received.***

17. MILITARY STATUS (PLEASE SELECT ONE)

VETERAN DEPENDENT SPOUSE DEPENDENT CHILD ACTIVE DUTY

18. BRANCH OF SERVICE

AIR FORCE ARMY COAST GUARD MARINE CORPS NAVY

19. ACADEMIC YEAR REQUESTED	20. SEMESTER REQUESTED <input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER
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21. LIST THE COURSE(S) REQUESTED TO BE CERTIFIED FOR VA BENEFITS *ONLY COURSES APPROVED TOWARDS DEGREE*

LIST THE ZIP CODE OF THE PHYSICAL LOCATION WHERE THE CLASS IS LOCATED, IF THE CLASS IS ONLINE, ENTER ONLINE IN ZIP CODE BLOCK

CREDIT HOURS	COURSE NAME(S) & COURSE NUMBERS i.e. ACCT 2190, ARTS 1361...	SEMESTER TYPE i.e. Trad, FTA/FTB	ZIP CODE	CAMPUS i.e. SA, HOU, HAR, OL
Total Hours				

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22. STUDENT ID

23. STUDENT NAME (LAST, FIRST, MI)

24. REQUESTED BENEFIT

CH 30 MONTGOMERY GI BILL

CH 31 REHABILITATION

CH 33 POST 9/11 _____ %

CH 35 DEPENDENT: CLAIM # _____

CH 1606 RESERVE/NATIONAL GUARD

CH 1607 REAP

_____ CREDIT HOURS FOR VA BENEFIT

FRY SCHOLARSHIP

TUITION ASSISTANCE

Comments:

25. NOTICE OF UNDERSTANDING: YES NO

Ch. 33 recipients must verify their enrollment status each month to continue receiving their monthly housing allowance.

Students can verify their enrollment status in one of two ways: Text Messaging – Students who choose VA's "Opt-In" feature will receive a text message each month prompting them to verify their enrollment status.

Telephone – Students may call the Education Call Center (ECC) at 888-442-4551 to verify their enrollment status.

If a student fails to verify for two consecutive months, VA will withhold future MHA payments until they call the Educational Call Center (ECC) to verify.

CHAPTER 33 TERMS:

1. At Our Lady Of The Lake University for the VA monthly housing allowance the student has to have a rate of pursuit of at least 51%. Undergraduate is 12 credit hours for full-time and 6 credit hours for part-time. For Graduate 6 credit hours per term is full-time and 3 credit hours per term is half-time. For doctoral students enrolled in dissertation or internship hours, 1 semester hour will not be considered full-time.

CONDITIONS:

1. All students must accept the Financial Responsibility Policy to receive Final Confirmation of Registration.
2. It is the student's responsibility to make payment arrangements with the Student Business Office.
3. If a student decides not to attend a registered course, it is the student's responsibility to formally withdraw.
4. A student who fails to make full payment of tuition and fees, including any incidental fees, by the due date may be prohibited from registering for class until payment arrangements are made.

IT IS HEREBY AGREED THAT:

I acknowledge and accept responsibility for all debts owed to Our Lady Of The Lake under the terms and conditions stated herein, and agree that:

1. I will notify Registrars of any change in my mailing address;
2. I will not be allowed to register for any succeeding academic period unless all debts to Our Lady Of The Lake have been satisfied; and
3. I will not be allowed to receive an official transcript of any work completed at Our Lady Of The Lake unless all debts to the University have been paid.

WITH MY SIGNATURE BELOW, I ACKNOWLEDGE THAT I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS

26. STUDENT SIGNATURE

27. DATE

28. RECEIVED BY

29. DATE