

The University of Alabama

OFFICE OF VETERAN AND MILITARY AFFAIRS STUDENT PROFILE SHEET

IMPORTANT! For Chapters 33 and 35 Only! A new Federal law has removed the three-year window for reclassification to in-state tuition. To reclassify, go to registrar.ua.edu and select the box titled "Residency for Tuition" and then select the "Application for Reclassification of Residency" box and follow the directions.

Please contact the registrar's office or the VMA if you need further assistance.

| TERM: | | | | | | Date: | | |
|--|---------------------|----------------------|-------------|----------------|------------------------|--|--|--|
| PERSONAL INFORMATION | | | | | | | | |
| Name: | | | | Date of Birth: | | | | |
| | Last | First | | MI | | | | |
| Address: | | | City: | | _ State: | Zip Code: | | |
| Home Ph | one: | | | Cell Phone: | | | | |
| E-Mail: _ | | | @cr | imson.ua.edu | CWID #: | | | |
| GENERAL INFORMATION | | | | | | | | |
| Classificatio | on: Freshman _ | Sophomore | Junior | Senior | Graduate | Transfer | | |
| Are you cui | rrently eligible fo | or Veterans Educatio | n Benefits? | Yes No | Sponsor's SSN | | | |
| If so which benefit are you currently eligible for? | | | | | **VA File Number is fo | r Ch. 35 ONLY!** r call VA 1-888-442-4551 | | |
| | | | | | | | | |
| Are you a current service member? Yes No What Branch: Army Navy Air Force Marine | | | | | | | | |
| National Guard Reserves Coast Guard | | | | | | | | |
| Are you a Veteran? Yes No Dates of Service: What Branch: Army Navy | | | | | | | | |
| Air Force Marine National Guard Reserves Coast Guard | | | | | | | | |
| Are you a disabled Veteran? Yes No Percent of Disability | | | | | | | | |
| Are you enrolled at the VA Hospital? Yes No | | | | | | | | |
| DEPENDENTS / SURVIVORS INFORMATION (Skip if Veteran/Service Member) | | | | | | | | |
| lam: Circ | cle One: Depe | ndent Spouse S | urvivor | | | | | |
| Is the Veteran disabled? Yes No Percent of Disability | | | | | | | | |

Student Acknowledgement of Responsibilities (Read, Sign, and Date) "I ACKNOWLEDGE"

That I must request to be Certified for GI Bill Benefits every semester I wish to be certified. I must turn in an advising form for each semester I am requesting benefits.

That I must turn in a Certificate of Eligibility (COE) reflecting my entitlement to GI Bill benefits upon requesting certification.

That I will be certified for my GI Bill benefits on a first-come, first-served basis.

That I must register in courses that are required for my degree. I understand the VA only pays benefits for those courses that are part of my approved degree program.

That I must be enrolled in more than half-time in any term/semester to receive housing allowance for CH31 and CH33.

That I am financially responsible for payment of fees and other charges not covered by the Veterans Administration.

That I will not receive my Pell Grant, or any other Refunds until my VA payments have been applied to my student account in accordance with UA Student Account Services policies.

That I am responsible for all VA debts resulting from reductions or termination of enrollment, even if the payment was directly submitted to the university by the Veterans Administration. I understand the university is required by law to reimburse the VA for any tuition and fees paid by the VA. I understand that I am responsible for reimbursing the university and that charges will be placed on my student account reflecting any amount the university pays the VA on my behalf.

That if I owe the university due to changes in my enrollment status, this debt must be paid in full at the time the charges are placed on my student account.

That I may not receive my first housing allowance payment until the 2nd full month class is in session due to VA processing times. This can be further delayed if I fail to turn in the required documents for certification in a timely manner prior to the semester start date.

That once I am enrolled at UA and have been certified through the Office of Veteran and Military Affairs, I am responsible to notify the office of any changes in my enrollment status. Federal law requires that I immediately report any changes in my enrollment status to include – class schedule such as adding or dropping classes, change of major, change of address and/or withdrawal. I must report changes promptly to avoid a delay in payments or possible overpayments. I must submit an Add/Drop form to the VMA office immediately. I will be responsible for any debts associated with the changes I make.

That this institution does not participate in advance payments for any GI Bill benefits.

That, if I am a Veteran or Service Member, I must request a Military Transcript be sent to the University Registrars office no later than the end of my 2nd semester of enrollment or I will no longer be eligible to be certified for GI Bill benefits until this requirement is met.

That, if I am transferring from another institution, I must submit a "Change of Program or Place of Training" form -For Veteran you will submit a VA Form 22-1995 and for Dependents a VA Form 22-5495. These can be found online and submitted at va.gov.

That, if I am receiving Chapter 33 (Post 9/11) Gi Bill Benefits or Chapter 35 (Dependents Education Benefits), I understand that I may be eligible for the In-State Tuition Rate. I understand that I must apply through the Registrar's Office to be considered for reclassification for Tuition Purposes Only. If I fail to apply for reclassification, I understand that I will be liable for all Out-of-State charges when my eligibility for GI Bill benefits run out.

By signing this form and providing my CWID below, I acknowledge my responsibilities listed above. I understand if I fail to comply with these requirements debts could be created by the VA and these debts have the potential to affect my student account at UA as well as any future GI Bill certifications.

| Student Signature: | _ CWID: | Date: |
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