

Veterans Academic Resource Center (VARC)

Must Be Typed (No Handwritten Forms) University of Central Florida P.O. Box 163505 Orlando, FL 32816-3505 Phone: 407-823-2707; Fax: 407-823-5879 Veteran Services
Certification—1607

VSC
1607

First Name MI Last Name Social Security Number Student ID (w/o the letter) Address City Academic Career / Training Type State Zip Major(s) Examples: Phone # BA Economics, BS Criminal Justice, MA History, Etc.. **UCF Knights Email** Session Minor(s) and/or Certificate(s) Fall С D Spring Year Hours Summer Are you a Florida resident for tuition purposes? Yes No No Are you or your spouse on Active Duty? Yes Are you taking any transient courses? Yes No Are you receiving money for school from a source other than VA? (TA, EDD, Soldiers to Scholars, Bright Futures, etc.) If so, list: Please type the name(s) of the source(s). Private Scholarships require award Letter.

By signing below, I understand that...

- 1) My award **WILL** be **REDUCED** without notification if I am enrolled for fewer hours than I certify, taking classes that do not apply to my major, receive an "N" grade for a class, withdrawal from a class after the add/drop period, or attempt a course for a third time where out-of-state tuition would apply.
- 2) I will **NOT** receive a VA deferment if my certification is not turned in **BEFORE** the end of the add/drop period of the semester for which I am certifying, or if I am not receiving VA educational benefits.

	Signature	Date	
Date Stamp	Bio Data	Checked if VA Once "Bio" tab matches cert	_
	Program/Plan	Major/minor/certification match in VA Once, PS, and all forms	
	Academic Pro.	□ No □ Yes □	
	Residency	☐ FL Resident ☐ Non-FL ☐ OOS waiver ☐	
	Major pending	Date:/	
PIDs on top of the first page of every for Documents	Enrollment*	EC : LW :> :@	
☐ 22-1995/22-5495 ☐ COE ☐ Checklist ☐ Transient ☐ VONAPP ☐ TEB ☐ DD-214 ☐ Award Letter ☐ OOS waiver	Ed Ben Panel	Created in PS by first check	
	Cert Panel	Created in PS by first check	
	VA Once Created by 2nd Check	Student Applied Using VONAPP. Student's Signed Request For Change Of Program/Place Of Training Is On File. Concurrent enrollment at secondary school: Tuition and Fees will be submitted as soon as possible after Add/Drop. Graduate Student - Full Time Measurement =	
NOBE		Work-Study Initials	
Certifying Official Ed Ben	Date	C.O. Initials Cert ID Date C.O. Initials Cert ID INITIAL CERTIFICATION AND / OR FINAL CERTIFICATION	
\$			