

VETERANS & DEPENDENTS BENEFITS AUTHORIZATION FORM

	Chapter 33 – Post 9/11 GI Bill	<input type="checkbox"/> Check if Active Duty - or - <input type="checkbox"/> Check if Spouse of Active Duty Veteran
	Chapter 35 – Dependents Education Assistance (veteran disabled)	Veterans File Number or Social Security Number (Required first time new student) <input style="width: 100%;" type="text"/>
	Chapter 35 – Fry Scholarship (veteran died line of duty)	Veterans File Number or Social Security Number (Required first time new student) <input style="width: 100%;" type="text"/>
-or-	Choose one: Chapter 1606 – Select Reserve Federal Tuition Assistance	Chapter 1606 – must verify enrollment monthly to receive payment. Online – www.gibill.va.gov/wave or by telephone 877-823-2378 Apply at least 60 days prior to start of term.

ARE YOU CHANGING PROGRAMS OR PLACE OF TRAINING?

Yes, I am changing program or place of training .

- If yes, Chapters 30, 33 1606 complete VA form 22-1995 located at www.vets.gov.
- If yes, Chapter 35 complete VA form 22-5495 located at www.vets.gov .

CHAPTER 33 RECIPIENTS PROVIDE A CURRENT STATEMENT OF BENEFITS EACH ACADEMIC YEAR

Yes, Statement of Benefits attached.

- Then anticipated funds can be