

VETERANS EDUCATION BENEFITS

Section A: Student Information			
Student Name:		GTID Number:	
Section B: Benefit Information			
My benefits chapter is (check one): Chapter 30 (MGIB-Active Duty) *Copy of Certificate of Eligibility needed Chapter 31 (Vocational Rehabilitation) Chapter 33 (Post 9/11) *Copy of Certificate of Eligibility needed Chapter 35 (Dependents' Education Assist:	ance)	Preferred Start Term of Benefits	
*Copy of Certificate of Eligibility needed Sponsor's VA File number: Chapter 1606 (MGIB Select Reserve) *Copy of NOBE needed (Notice of Basic Eligi Other/Unknown (Please Explain): I am a (check one) Veteran Dependent	bility) Spouse		
		classification (check one):	
First-year student Transfer student Returning student	In-State	ate	
Certificate Information			
I acknowledge and understand that I may only responsibility to notify the Registrar's Office at Georgia reassessed. If I add/drop/withdraw from a benefit-eligibl required to repay any fees incurred. I am responsible for students will have their certifications automatically renembenefits for any given term must notify the Registrar's O	Tech of any change in e class after the add/ all debts resulting fr wed each semester w	n my course load, in a timely manner, so the drop deadline, and tuition/fees have alread com reductions or terminations of enrollm while in attendance at Georgia Tech. Studer	nat my benefits can be dy been reported, I may be ent. Continuously enrolled
· ·	understand studen	t responsibilities listed above.	
Student Signature:		Date:	
Veterans Education Benefits Georgia Institute	of Technology	registrar.gatech.edu	phone 404-894-4150