

WAUKESHA COUNTY TECHNICAL COLLEGE

Financial Aid Department C-019

800 Main Street Pewaukee, WI 53072
262.691.5436 (Phone) 262.691.5098 (Fax)
Email: money@wctc.edu

2009-2010 Enrollment Certification Form

Name: _____ Date of Birth: ____/____/____ (mm/dd/yyyy)

(First) (Middle) (Last)

SSN: _____ Student Number: _____

Local Address: _____

(Number, Street, Apartment)

(City) (State) (Zip)

New Address? Yes No Phone: _____ Email: _____

First Time Applying for Benefits at this Institution? Yes No

If Educational Benefits Used Previously, Where/When? _____

MGIB Benefit Program: Chapter 30 (Active Duty GI Bill) Chapter 1606 (Reserve/National Guard)
(Check one) Chapter 31 (Vocational Rehab) Chapter 1607 (REAP-Activated Guard or Reserve)
 Chapter 35 (Survivors and Dependents) Other (please specify)
 Chapter 33 (Post 9/11 GI Bill)

VA Claim #: _____ (Needed for Chapter 35)

Enrolled as: Associate Degree Technical Diploma Certificate

Your Status: Continuing Student Returning Student New Student Transfer

Program Name _____

Estimated number of credits you will be taking: (please check one for each semester)

	0	1-5	6-8	9-11	12+
Fall 2009					
Spring 2010					
Summer 2011					

Are you taking any Remedial/Deficiency (below 100 - level) Courses: Yes No

If Yes, Number of Remedial/Deficiency credits each term: _____ Need determined by: Test Interview
Fall Spring Summer

List any repeated Course(s) this Term: _____ Previous grade(s): _____

ACE <http://www.acenet.edu/>
AARTS <https://www.aarts.army.mil>
SMARTS <https://www.smart.cnet.mil>
CCAF <http://www.maxwell.af.mil/au/ccaf/transcripts.asp>
DANTES http://www.dantes.doded.mil/dantes_web/examinations/transcripts.htm#After
CLEP http://www.dantes.doded.mil/dantes_web/examinations/CLEP.htm

TRAINING TIME REQUIREMENTS FOR VA EDUCATIONAL BENEFITS * Based on a STANDARD SEMESTER TERM

Degree Programs & Technical Diplomas:

Training Time Equivalency	Total Credits Term	Theory/Lecture Predominate	Shop/Laboratory Predominate
Full-time	12 or more	18 hours	22 hours
Three-quarter	9-11	13-17 hours	16-21 hours
One-half	6-8	9-12 hours	11-15 hours
Less than one-half	5 or less	8 or less	10 or less

*Training time is determined for courses offered for a shorter or longer period by using a training time equivalency table.



Veteran Benefits Payment Agreement

1. **The payment of veteran educational benefits requires that a student is actually enrolled for and attending classes.** An enrolled student is one who has registered and paid the required fees.
2. **You must submit transcripts of all previous coursework and military training for transfer credit/advanced standing AND file your DD214** (Certificate of Release or Discharge from Active Duty) **or NOBE** (Selected Reserve Educational Assistance Program Notice of Basic Eligibility) **with the Veterans' Certifying Official.**
3. **The veteran or other eligible person must also verify continuing enrollment monthly by web access or toll-free phone.**
4. **If a student receiving VA benefits drops or adds courses or fails to reenroll in a semester for which certification was requested above, it is that student's responsibility to notify the Veterans Office immediately.** If such changes of course load or enrollment is not reported, the student will be required by law to refund the overpayment.
5. **All students are required to submit a Change of Program Form if they change programs.** This will be forwarded to the appropriate Veterans Office to keep your records updated.
6. **All students are required to maintain an overall grade point average of at least 2.0.** Unsatisfactory progress will be reported to the VA. A veteran's educational benefits will be terminated due to non-attendance or non-participation in classes.
7. **A veteran may be certified only for required courses and electives** needed for their selected program as specified on the curriculum.
8. **Advance Pay** must be requested in writing at least 30 days before registration for any given school semester.
9. **Continuous Pay** for intervals between semesters must be requested in writing at least 30 days before the first day of class **and may not exceed a period of 57 days.** Enrollment in consecutive terms where you receive continuous pay cannot be processed for advance pay.
10. **The MGIB recipient** must verify his or her continuing enrollment on the last day of each month or within a week after by internet web: <http://www.gibill.va.gov/wave> or by phone: 1-877-823-2378.

I, the undersigned, have read the items above and do hereby understand them and will abide by them. My signature below indicates the information on the previous page is true and correct. I give my permission for VA representatives to review my educational records. I understand that I am responsible for paying fees and tuition within the deadlines established by the school.

Date _____ Signature _____