

Veterans Data Sheet

To help ensure timely and correct processing of your benefits, please READ and fill out COMPLETELY. Please PRINT.

Last Name:	First Name:		Middle Initial:	
Mailing Address:				
(Street or P.O	. Box #)	(City)	(State) (Zip Code)	
Phone where you can be reached: (_)	SSN:		
Gender (Circle Applicable Response	e): Male	Fem	nale	
Degree Program (Circle Applicable	Response): Access	Onl	ine Traditional	
Degree Enrollment: Associate of Ar	ts Bachelor o	of Science	Bachelor of Arts	
Major Area of Study:	·			
Email:	mail:@students.point.edu			
SERVICE MEMBER'S BRANCH (Army Navy USMC Air F	`	,	d Guard Reserves	
Are you a dependent using transferred	ed Post 9/11 educati	ional benefits? _	yesno	
VA Educational Benefit: (check ap	plicable benefit)			
Chapter 33 (Post 9/11) Chapter 30 (GIBILL)				
Chapter 35 (DEA)	Chapter 31 (Voc. 1	Rehab)		
Chapter 1606 (Sel Res)	Chapter 1607 (RE	AP)		
*Chapter 35 (DEA-Dependents Educational Assistance) Sponsor SSN:				
	Tuition Assistance	ee		
Tuition Assistance (TA) is a Department of by branch of service and can even vary bet Guard. If a student receives education benefits may be an issue. The issue might both have regulations about receiving VA ensure there isn't a duplication of benefits.	ween units depending of efits from VA and recei- involve VA regulations, benefits and TA at the s	on whether the unit wes TA benefits fro DoD regulations,	is active, reserve, or National om the military, duplication of or both since VA and DoD	
Initial When Read: Do you anticip	pate using Tuition Ass	istance?Yes	S No	
Signature:		D:	ate:	
~		100		