

## CLASS CERTIFICATION FORM



**Veterans or dependants must submit this form each semester they wish to receive Educational Benefits. Upon receipt of your Veterans Benefits Form; student's turn in their Veteran's Benefit Form along with this Class Certification Form to the Veterans Freedom Center in Gullo II, and continuing students submit subsequent Class Certification Forms to Admissions & Records.**



FILE#: \_\_\_\_\_ Student ID#: \_\_\_\_\_ Summer/Fall/Winter/Spring \_\_\_\_\_  
Circle one **YEAR**

NAME: \_\_\_\_\_  
Last First Middle

ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_

PHONE#: \_\_\_\_\_ WORK#: \_\_\_\_\_

EDUCATIONAL OBJECTIVE (check one):  AA/AS  Certificate of Achievement  Transfer

STUDENT'S STATUS (check one):  Enrolled at EVC Last Semester  New student  Returning to EVC

Concurrently enrolled in another institution (which) \_\_\_\_\_

Will you be attending EVC next semester?  Yes  No

VETERAN'S CHAPTER (check one):  30  31  32  33  1606 DEPENDENT'S CHAPTER (check one):  35

List All Courses For Semester You are Applying For					
Course	Reg ID	Section	Units	Subject Area	Final Grade
Math 025	84538	202	6	Math <span style="color: red;">(Sample)</span>	
Total Units Registered for Benefits:					

- I certify that the above information is correct.***
- I will promptly notify the school and the Office of Veterans Affairs if any changes to my schedule occur (adds, drops, withdrawals, and/or incompletes) to keep my certification accurate.***
- I am liable for any overpayment that may occur due to the un-timeliness on my part to report a change.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_