

Class Certification Form

New Students: Submit ALL documents listed in the Veterans Benefits Certification Instructions along with a completed Class Certification Form (CCF) and approved Ed Plan to evcvet@evc.edu.

Returning/Continuing Students: Submit Class Certification Form (CCF) with approved Ed Plan to evcvet@evc.edu each semester.

Veterans Certification of Benefits deadline is listed on the Academic Calendar.



Name: _____ EVC Student ID #: _____ (Dependents) VA File #: _____

Phone Number: _____ Email Address: _____

Chapter: ☐ 30 (Active Duty Montgomery GI Bill®) ☐ 31 (Vocational Rehab) ☐ 33 (Post 9-11) ☐ 1606 (Reservist) ☐ 35 (Dependent)

Objective: ☐ AA ☐ AS ☐ Certificate of Achievement ☐ Transfer UC/CSU

Major on your Ed Plan: _____ Most Recent Ed Plan/Date: _____

Student Status: ☐ New student ☐ Enrolled at EVC Last Semester ☐ Returning to EVC (after a 2-semester break)

Do you plan on re-enrolling at EVC next semester? ☐ Yes ☐ No

Have all prior official college transcripts been submitted to Admissions & Records? ☐ Yes ☐ No

Please state any colleges you are concurrently enrolled in (if applicable): _____



Semester are you certifying enrollment (Choose one): ☐ Winter ☐ Spring ☐ Summer ☐ Fall Term Year: _____

List all courses that you are taking for the semester below:

Campus	Course	Reg ID	Section	Units	Subject Area	In-Person, Online or Hybrid	Waitlist
EVC	Math 025	102458	202	6	Math (Sample)	In-Person	Yes

Total Units: _____

Effective August 1, 2009. Students whose enrollment was **exclusively distance learning training were not eligible for the full monthly housing allowance (MHA)**

- ☐ I certify that the above information is correct
- ☐ I am aware that the VA will only pay for classes that are on my Ed Plan
- ☐ I will immediately notify VFC of any changes that I make to my Class Certification Form
- ☐ I am liable for any overpayment that may occur due to enrollment errors, or failure to report changes.

Signature: _____ Date: _____