



## Veteran/Dependent Information Sheet

Beginning Term: \_\_\_\_\_  This form is to update my information only

Name: \_\_\_\_\_ SS# \_\_\_\_\_ SID# \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Pronouns: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Personal Email: \_\_\_\_\_

- I have attended SLCC in the past.
- I am planning on transferring after graduation (transferring school):  
\_\_\_\_\_
- I am planning on graduating from SLCC with my degree/certificate
- COE Received (***Please provide our office with your certificate of eligibility before the beginning of your 2<sup>nd</sup> term***)
- I am a resident of Utah and am an established resident with SLCC.

### Education Benefit

- Chapter 1606 (Reserve/Guard)
- Chapter 30 (MGIB)
- Chapter 31 (Vocational Rehabilitation) - Counselor: \_\_\_\_\_
- Chapter 33 (Post 9/11)
- Chapter 33T (Dependent Transfer/FRY)
- Chapter 35 (Dependents Education Assistance) - VA File Number: \_\_\_\_\_
- Secondary School – Parent School: \_\_\_\_\_

### Major/Program

- AA: \_\_\_\_\_
- AS: \_\_\_\_\_
- AAS: \_\_\_\_\_
- Associates in Pre-Engineering (APE): \_\_\_\_\_
- Certificate: \_\_\_\_\_
- Salt Lake Technical College: \_\_\_\_\_



Initial All

\_\_\_\_ I give SLCC Veteran Services and support staff permission to share personal information (i.e., grades, tuition, etc.) with the following agencies: the Department of Veteran Affairs (VA), and Department of Defense (DOD and the Utah Department of Military and Veteran Affairs.

\_\_\_\_ I understand the VA will only pay for classes listed in the SLCC catalog as required for my major. It is my responsibility to know what classes are required for my declared degree.

\_\_\_\_ I understand that I am required to request ALL transcripts by the end of my **first semester including military (JST transcripts)** and submit a request for the college to evaluate them.

*Previous colleges attended:* \_\_\_\_\_

\_\_\_\_ I understand my major must be the same with SLCC as with the VA.

\_\_\_\_ I understand I must request certification every semester if I want to use my VA educational benefits.

\_\_\_\_ I understand my college email will be the primary form of communication from SLCC Veterans Services.

\_\_\_\_ I understand to continue to use VA educational benefits I must maintain a cumulative GPA of 2.0.

\_\_\_\_ I understand that it is my responsibility to communicate with the VA (1-888-442-4551) when I have questions related to my benefits.

\_\_\_\_ I understand once registered for the semester and have notified the Veterans Center at SLCC about enrollment and intent to use benefits, that I may not add or drop a course without lettering the Veterans Center at SLCC aware of the change.

\_\_\_\_ I understand that I should NOT depend on my VA checks for my essential living expenses (rent, car payment, food, etc.). While VA checks should come on a regular basis, this is not guaranteed by SLCC's Veterans Center or the VA.

**You will be subject to all VA regulations, including those described in your Welcome Letter. By signing you have acknowledged you have read a copy of the Welcome Letter.**

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Office Signature

\_\_\_\_\_  
Date