



Veterans Assistance Office
CERTIFICATION QUESTIONNAIRE

MPC ID# _____ / _____ / _____ SS# _____ / _____ / _____

CLAIM # (Ch35 only) _____ / _____ / _____

CIRCLE ONE: Veteran or Service Member / Spouse / Child

NAME _____ / _____ / _____
Last First MI

ADDRESS _____ (where mail is sent)
Street Apt

_____ City State Zip Code

TELEPHONE- Home: (_____) _____ Cell / Work: (_____) _____

EMAIL: _____

DATE OF BIRTH _____ / _____ / _____ (mm/dd/yr)

EDUCATIONAL BENEFITS

Check below the type of educational benefit you expect to receive:

___ Chapter 30 - Montgomery G.I. Bill Active Duty (MGIB-AD)

___ Chapter 31 - Vocational Rehabilitation (VocRehab)

___ Chapter 32 Veterans Educational Assistance Program (VEAP)

___ Chapter 33 – Post 9/11 G.I. Bill
Veteran ___ Spouse (TOE) ___ Child (TOE) ___

___ Chapter 35 – Survivors and Dependents Educational Assistance (DEA)
Child ___ Spouse ___

___ Chapter 1606 – Active Reserve or National Guard G.I. Bill

___ Chapter 1607 – Reserve Educational Assistance Program (REAP)

___ VRAP – Veterans Retraining Assistance Program

SEMESTER FOR WHICH YOU ARE REQUESTING CERTIFICATION: _____ 20____

LIST THE CLASSES YOU ARE REQUESTING CERTIFICATION FOR:

SECTION NUMBER / COURSE, ex:1234 / MATH 1	UNITS		SECTION NUMBER / COURSE, ex:1234 / MATH 1	UNITS

I, _____ certify that the information on this form is complete and correct.
(print name)

I also understand that my VA Educational Allowance is based upon the number of units in which I am enrolled and that any changes in my class schedule (adds and/or drops) must be immediately reported to the Veterans Office at Monterey Peninsula College.

Student's Signature

Date

Veterans Office Staff Signature

Date



Veterans Assistance Office

REQUEST FOR RELEASE OF INFORMATION FORM

I hereby authorize the Veterans Administration and Monterey Peninsula College to release information on my educational or other pertinent benefits claim whenever such information is needed by both agencies.

Student's Name (last, first, mi) SS#

Signature Date