

VA Request for Certification

Submit this form to the financial aid office every semester to be certified and authorized payment through the VA.

Name: _____ Email Address: _____

Major: _____ Student ID Number: _____ VA Education Chapter _____

Address: _____
Street City State Zip

Phone Number: _____
Daytime Evening

Term (circle): Fall Spring Summer I receive Tuition Assistance (Active duty/Guard/Reserve): Yes No

Is this a change to your current semester schedule since previously submitting your initial request form? Yes No

If yes, what has changed? _____

STATEMENT OF UNDERSTANDING – Please read carefully and initial

_____ Each term I MUST report my registration and changes in my enrollment to my Veterans Certifying Official (VCO). Your school VCOs are Tara Nunnelley and Brianna Ridgway they can be reached at 208-732-6273 or vabenefits@csi.edu

_____ I must be enrolled in an approved program of study that leads to a standard college degree and have all prior training evaluated by the end of my second semester of enrollment. I do not expect to be paid by the VA for classes previously passed. I understand that courses that are audited (AU) are not eligible for VA educational benefits. I must make satisfactory progress toward graduation.

_____ I understand that final grades of W, NC and F reported with “last date of attendance” may result in an overpayment from the VA.

_____ Courses for which an “I” (incomplete) is awarded must be completed during the succeeding year. Otherwise, my entitlement for benefits for that course may be reduced and may result in overpayment.

_____ I understand that classes scheduled to meet for less than the standard semester term dates may be paid at a different rate based on the number of credits and the length of the class.

_____ I understand that payment for developmental (remedial) classes will not be allowed unless need for such class(es) is established by the ALEKS placement test. Also, remedial courses cannot be taken online and certified.

_____ I understand that the VA will hold me responsible for any overpayment of my education benefits.

_____ I understand that if this form is submitted to the financial aid department with less than 30 days left to the semester start date (first day of class) that VA processing times are lengthy and my benefits **may** be delayed.

_____ (Chapter 33 Post 9/11 GI Bill® recipients only) I understand that **for any courses not covered by the VA**, If I fail to pay my student account balance in full, the College may refer the account to an outside collection agency. If assigned to a collection agency, a fee of up to 33 percent will be added to the outstanding balance as determined by the Idaho Statute 67-2358 and your delinquent account may be reported to one or more of the national credit bureaus. The College will not issue transcripts and reserves the right to withhold my grades, diplomas, subsequent registration, housing assignments, etc., until my account is paid in full.

_____ (All Chapters other than 33) I understand that my tuition must be paid in full or have a CSI tuition loan agreement on file with the business office by the tuition payment deadline. If I fail to pay my tuition in full or fail to file a tuition loan agreement, I understand that I will have a late fee assessed to my account and will be dropped for non-payment.

Please certify my VA Education Benefits for the term above, I have read and understand the above statements.

Signature: _____ Date: _____