James D. Campbell Brigadier General Commissioner 207-430-6000



Peter W. Ogden
Director
Bureau of Veterans Services
207-430-6035

Department of Defense, Veterans and Emergency Management Bureau of Veterans Services State House Station 117

	Camp Ke	State House eves. August	Station 117 a, Maine 04333-011	17			
VETERANS' DE		_ **	•		S APPI	LICATION	
Applicant (Student) Information							
Name:	Birth Date:		SS#:			Tel:#	
Street Address:			City/Town:			Zip:	
Relationship to Veteran:			School Name: Semester of First Attendance:				
() Child; () Spouse; () Widow/Widower; () Step-child				A	ttendand		
Class Entering:			Non-Veteran Parent's Name & Address:				
()Freshman ()Sophomore ()Junior ()Senior							
*NOTE: Children and step-children the child's 22 nd birthday. If the child US Armed Forces, then the child may service, a copy of DD214 must be subm	is unable to e apply to beg	enroll in a degre in this benefit u	e program prior to tur	ning 22	years of a	age due to service i	n the
Veteran Information							
Name:	SS#:			VAC		Claim #:	
Residency at Time of Entry into Military (If other than Maine, proof of residency must be submitted with application.):					_	Length of Time Veteran has been a Resident of Maine:	
Current Mailing (Street) Address: City/Town:			State:		Zip:		
Check the statement that applies to () Living and is permanently & to () Was Killed in Action. () Died from a service-connected () At the time of death was totally not related to the service-conne () Is a member of the Armed Ford captured, or forcibly detained of	disability as and perman ected disabilities on active or interned in	d of a service-c a result of servicently disabled of ty duty who has be the line of dut	ice. due to service-connect been listed for more th y by a foreign governi	ed disab nan 90 da ment or	oility, but ays as mi power.	issing in action,	
IF APPLICANT IS YOUR STEPC parent of the stepchild before the stepchild							
reside in the veteran's household w					parcii	or the step-emu i	Hust
Do you provide most of the support of Does the child live in your household in school only) Are you currently married to the child	d most of the	e time?Ye	esNo (Exception:	_		-	ı child
I certify that the above information i	s correct						
		(Signat	ture of Veteran)			(Date)	

PENALTY FOR FALSE STATEMENT OF FRAUDULENCY: Whoever knowingly makes a false statement, oral or written, relating to a material fact in support of application for aid under this section could be guilty of a violation of Title 17-A, MRSA.

(Signature of applicant (student)

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Veterans Dependents Educational Benefits School Release of Information Form

I give permission to the University of Maine System, Community College System and/or Maine Maritime Academy to release to the Bureau of Maine Veterans Services information necessary for determining and administering eligibility benefits under the Veterans Dependents Educational Benefits Program. This release will remain in effect throughout the duration of my eligibility under this program.

The following information may be released to Maine Veterans Services to administer this program:

- 1. Enrollment Verification (ie. Effective date of enrollment acceptance, starting semester and name of Degree)
- 2. GPA at the end of each semester
- 3. Total credit hours waived (spouses *only*)
- 4. Transcripts
- 5. Current name and address
- 6. Students current telephone number
- 7. Email address

Date of Birth	Printed Name of Student
Signature of Student	Date

FAX #: (207) 626-4471

DOCUMENTATION REQUIRED TO BE SUBMITTED IN SUPPORT OF APPLICATION:

Children:

- Copy of Birth Certificate reflecting names of both parents
- Copy of VA letter verifying veteran's disability
- Copy of applicant's DD214 if unable to enroll in a degree program prior to age 22 due to military service.
- <u>If the veteran did not enter the service from Maine</u> proof of residency needs to be submitted showing the veteran has been a resident of Maine for at least five years and a copy of veteran's DD214.

Step-Children:

- Copy of Birth Certificate reflecting names of both natural parents
- Copy of Marriage Certificate of natural parent and veteran
- Copy of VA letter verifying veteran's disability
- <u>If the veteran did not enter the service from Maine</u> proof of residency needs to be submitted showing the veteran has been a resident of Maine for at least five years and a copy of veteran's DD214.

Adopted Children:

- Copy of Birth Certificate reflecting names of both parents
- Copy of adoption certificate
- Copy of VA letter verifying veteran's disability
- Copy of letter from school verifying enrollment in a degree program.

NOTE: If adopted child and claiming benefits on natural parent who is a veteran, then need to submit the following:

- Copy of Birth Certificate
- Proof of paternity to natural parent (examples: adoption papers, original birth certificate reflecting name of natural veteran-parent, or any other legal document with such verification
- <u>If the veteran did not enter the service from Maine</u> proof of residency needs to be submitted showing the veteran has been a resident of Maine for at least five years and a copy of veteran's DD214.

Spouse:

- Copy of Marriage Certificate
- Copy of VA letter verifying veteran's disability
- <u>If the veteran did not enter the service from Maine</u> proof of residency needs to be submitted showing the veteran has been a resident of Maine for at least five years and a copy of veteran's DD214.

OTHER INFORMATION:

- College preparatory schooling and correspondence courses do not qualify under this program.
- Benefits will <u>not</u> be authorized for schooling incurred before date of application for this program.
- This program applies only to the following schools:

State of Maine University System, Maine Community College System and Maine Maritime Academy.

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