



YORK COUNTY COMMUNITY COLLEGE

York County Community College

Financial Aid Office

112 College Drive

Wells, ME 04090

P: 207-216-4403, finaid@yccc.edu

(Be sure to **password protect** documents you send through email)

**York County Community College Veterans Services
Request for Certification**

This form must be completed and returned to the Financial Aid Office **30 days** prior to the beginning of **EACH** semester. **Forms returned late may cause a delay in the payment of benefits. Inaccurate or incomplete information may cause a termination of your benefits.**

Name _____ Student ID# _____

Telephone _____

Social Security Number _____ VA File Number _____

Mailing Address _____

E-mail Address _____

VA Benefits Chapter (Check One):

- _____ Chapter 30 (Montgomery GI Bill)
- _____ Chapter 31 (Vocational Rehabilitation)
- _____ Chapter 32 (Veterans Educational Assistance Program- VEAP)
- _____ Chapter 33 (Post 9/11 GI Bill)
- _____ Chapter 33 (Benefits transfer to Spouse or Dependent Student)
- _____ Chapter 35 (Survivors & Dependents)
- _____ Chapter 1606 (Montgomery GI Bill – Selected Reserve or National Guard)
- _____ Chapter 1607 (Reserve Educational Assistance Program- REAP)
- _____ MyCAA (Military Spouse Career Advancement Account)
- _____ VRAP (Veterans Retraining Assistance Program)

Are you currently on Active Duty? _____ Yes _____ No

Semester For Which Benefits Are Being Requested (Check One):

_____ Fall _____ Winter _____ Spring _____ Summer

Program of Study at YCCC (Degree/Major) _____

Please list below the courses in which you are enrolled and are requesting certification for VA Educational Benefits:

Course Number <i>Example: ENG-101-02-LB</i>	Course Location & Zip Code (for CH. 33 students ONLY) ** <i>Example: Pratt Bldg., 04090</i>
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**** IMPORTANT:** If a student is performing training at multiple sites during a term for a particular course (i.e., performing clinicals at different hospitals, every few weeks) then all of those dates and locations must be listed here. Attach additional information if needed. You may need to consult with your Department Chairperson.

By signing, the student understands that he/she will only receive benefits for courses that apply to his/her current degree. VA will only recognize one repeated attempt of a particular course.

Student's Signature

Date

If you plan on emailing documentation to us, please password protect any documents that have personally identifiable information (such as a Social Security Number) prior to emailing it. Instructions can be found here: www.yccc.edu , click on "MyYCCC" at the top, "Campus Services", "Financial Aid", "Financial Aid Forms", and "Password Protect Your Documentation".