



Veterans Education Training and Employment
Virginia Department of Veterans Services

Virginia State Approving Agency



School Certifying Official Handbook
for On-the-Job-Training (OJT)
& Apprenticeships Programs

Table of Contents

| | |
|-------------------------------------|-------|
| Director Letter | 3 |
| Preface | 4 |
| Contact Information | 5-10 |
| Difference Between SAA & DVA | 11 |
| Approval | 11-12 |
| Types of School Visits | 13 |
| School and Student Responsibilities | 14-18 |
| Education Benefit Programs | 19-20 |
| Certification Process | 21-25 |
| Miscellaneous Information | 26-33 |
| Forms | 34-61 |
| Definitions/Terms | 62-72 |

Virginia Department of Veteran Services
Veterans Education Training and Employment
State Approving Agency
900 East Main Street, Sixth Floor, West Wing
Richmond, Virginia 23219

July 1, 2015

Dear Certifying Official:

Many veterans are reentering the work force after serving their country. Many of these veterans have earned educational benefits while serving and can utilize them as a trainee at your company.

Veterans Education Training and Employment (VETE) and its Virginia Values Veterans (V3) program recognize that veterans are a valuable asset to Virginia's work force. Veterans have developed qualities such as discipline, reliability, maturity and goal oriented attitudes. Due to changes in the Commonwealth's economy many traditional blue collar trades are now joined in the work place by emerging information technology, high tech positions, and environmental remediation. These merging industries are beginning to dominate Virginia's economy. Many of these new industries may be eligible for Virginia State Approving Agency (SAA) approval. If the SAA approval is gained, the new as well as the traditional trades can be used by your companies to attract, hire and retain veterans and while training, the veteran can receive monthly education stipends that are tax free in addition to salaries you will be paying them.

Your company being approved to offer education and training to veterans, serves as an incentive to attract highly qualified employees to your company. This is a profitable scenario for all stakeholders.

Thank you for your interest in serving our veterans and their families.

Sincerely,

Annie Walker, Director
Veterans Education Training and Employment

PREFACE

This handbook is written for Department Veterans Affairs (DVA) Certifying Officials and anyone at a facility involved with certification of beneficiaries of DVA education benefits. This Handbook is a collaboration of the Virginia State Approving Agency Technical Assistance Handbook and DVA School Certifying Official Handbook but drafted specifically for On-the-Job Training and Apprenticeship Training programs.

Your facility has been approved to offer the program(s) to veterans and other eligible persons. The requirements that you met in order to receive approval must be maintained. The following information is being provided to assist you in managing the DVA training program.

NOTE: Throughout these guidelines the word "trainee" refers to the person(s) receiving benefits.

The word School Certifying Official means any individual authorized to certify a veteran at a training establishment or school.

CONTACT INFORMATION

Regional Processing Offices

Map 1 represents Claims Processing Jurisdictions. All mail related to claims processing should be sent to the appropriate RPO as shown on the Claims Processing Map.

MAP 1

| St. Louis/Central Region | Buffalo/Eastern Region |
|--|---|
| VA Regional Office PO Box 66830 St. Louis, MO 63166-6830 FAX (314) 552-9741 | VA Regional Office PO Box 4616 Buffalo, NY 14240-4616 FAX (716) 551-3241 |



| Muskogee/Western Region | Atlanta/Southern Region |
|--|--|
| VA Regional Office PO Box 8888 Muskogee, OK 74402-8888 FAX (918) 781-7863 | VA Regional Office PO Box 10022 Atlanta, GA 30031-4032 FAX (404) 929-3009 |

| Contact Information for SAA and Resources | | |
|--|----------------|--|
| Director Annie Walker | (804) 225-2721 | Annie.Walker@dvs.virginia.gov |
| Assistant Director Martina Murray | (804) 225-2720 | Martina.Murray@dvs.virginia.gov |
| Operations Manager Chris Mackey | (804) 786-0571 | Chris.Mackey@dvs.virginia.gov |
| Operations Coordinator Trinika Lewis-Wilson | (804) 786-0571 | Trinika.Lewis-Wilson@dvs.virginia.gov |
| Senior Regional Manager Tramaine Carroll-Payne | (804) 248-1239 | Tramaine.Carroll-Payne@dvs.virginia.gov |
| Regional Manager Phillip Clayberg | (804) 489-0552 | Phillip.Clayberg@dvs.virginia.gov |
| Compliance Survey Support Specialist Helen McClure | (804) 225-2298 | Helen.McClure@dvs.virginia.gov |
| Education Support Specialist Senchal Olivole | (804) 225-2298 | Senchal.Olivole@dvs.virginia.gov |
| State Approving Agency Website | | http://www.dvs.virginia.gov/education-employment/ |
| Processing of OJT, Apprenticeship | | Buffalo Regional Processing Office (RPO) P.O. Box 4616 Buffalo, NY 14240-4616 Fax: (716) 857-3296 |
| School Certifying Official Hotline (School Certifying Officials Only) | | 1-855-225-1159 |
| GI Bill Hotline | | 1-888-442-4551 |
| Education Liaison Representative | | James Quesenberry, ELR 314-22 Department of Veterans Affairs Roanoke RPO 210 Franklin Rd., SW Roanoke, DVA 24011 Office: 540-597-1689 Fax:540-597-1794 |
| GI Bill website | | http://www.benefits.va.gov/gibill/ |
| Apply for Education Benefits | | https://www.ebenefits.va.gov |
| DVA Debt Management Center | | 1-800-827-0646 |
| Direct Deposit Enrollment (trainees) | | 1-877-838-2778 |

School Certifying Official Hotline

School Certifying Officials now have a direct line of communication to contact DVA for official inquiries on trainee issues. The toll free number for the School Certifying Official hotline is **1-855-225-1159**. This line is staffed by Education Case Managers who have the expertise to answer and resolve most SCO questions. The hours of operation are 7:00am to 5:00pm (CST), Monday through Friday. **This number is for SCO's only.**

Call the toll-free line for:

- Hardship cases
- Status of claim questions
- Questions on individual trainee payment issues

Call your SAA for:

- Approval issues
- Certification questions

Education Call Center

The toll-free number for the Education Call Center is **1-888-442-4551**. The Call Center is in Muskogee, OK, and Education Case Managers are available 7:00am to 7:00pm (CST), Monday through Friday. The system's automated function can provide information about benefits, applications, etc., and are available 24 hours a day, 7 days a week. Individual Veterans can access their own record to obtain date of last benefit payment, check amounts, etc. Please utilize the automated system as much as possible.

Internet Inquiries

What does the Internet Inquiry System do?

The Internet Inquiry System allows you to find answers to Frequently Asked Questions (FAQs) without calling the toll free number. The SEARCH FAQ feature, in the Support Section, allows you to find answers to questions by category. The inquiry system also allows users to ask DVA questions not in the "Answers" area. If the answer is not available, users can send an inquiry to DVA using the "Submit a Question" tab. It may be beneficial to search the FAQ's before submitting an inquiry.

How to register in the DVA inquiry system

Go to the "MyStuff" tab. Click on "Create a New Account"

- **Password:** Make up a strong password-something you can remember but not too easy
- **Verify Password:** Just type it again to make sure you have it right

- **First Name:** Your first name
- **Last Name:** You've got it –Last name
- **State:** The State where your school is located. This is important because the questions are routed initially to the appropriate RPO based on this field
- **Social Security Number or Claim Number:** Just leave it blank or you can put in your school's facility code
- **Suffix:** Leave it blank
- **Phone Number:** Provide a phone number where you can be reached

On the GI Bill website, <http://www.benefits.va.gov/gibill> , click on the Submit a Question link. You will see a tab labeled "Ask a Question."

Complete the page providing the following information:

- Email address-self explanatory
- Subject-"School Official "-This is important since we use it to route this Inquiry to someone who can set-up your account
- Questions-Provide the name of your school and the VA Facility Code
- Product-Select "GI Bill" from the drop-down menu
- Category-Select "School Official Only" from the drop-down menu

This information is important because we use it to establish your account as school official and some of the information gives your inquiries priority routing once they enter our system.

How do I send an Inquiry?

Once you have registered, go to the "MyStuff" tab, enter your e-mail address and password, and click login. Once you are logged in, click on "Ask a Question" and fill out the form. If you have a problem case where payment is due, enter "School Certifying Official Hardship Case" in the subject line. Your inquiry will be handled on a priority basis (24 to 48 hours). If you have a general inquiry such as delimiting date or remaining entitlement, please do not identify it as a hardship case. You should receive a reply to your general inquiry in 3 to 5 working days.

NOTE: You will receive a system-generated message when you submit your question advising you to expect an answer in 8 to 10 days.

IMPORTANT: Responses to your inquiries are not e-mailed to you. However, you will be notified by e-mail that a response has been submitted. You must go to the website, click on "Ask a Question and Answers" login in order to view the answers. Responses to

your inquiries will be in the area, "My Questions and Answers." Click on the "Questions" button to see a listing of your inquiries.

Who do I contact if I have question?

If you have any questions about the inquiry system please call DVA toll free at 1-888-442-4551 or contact your ELR.

Use this link to go to Internet Inquiry System to submit an inquiry.

<https://gibill.custhelp.com/app/utils/login/redirected/ask>

The Difference Between the SAA and DVA

The State Approving agency (SAA) originated when the GI Bill of Rights was signed into law in 1944 by President Franklin D. Roosevelt. Congress recognized that each state had the right and responsibility for the education and training of its residents. The SAA, together with the Department of Veterans Affairs, manages the veterans' education and job training programs.

The State Approving Agency (SAA) for Veterans Education Training and Employment is charged with approving vocational, educational and professional programs of education and job training for veterans, their dependants and other eligible persons. The SAA approval allows the U.S. Department of Veterans Affairs to determine individual benefit amounts and length of assistance. Any On-the-Job training (OJT) or Apprenticeship (APP) training facility that enrolls veterans for the purpose of receiving education entitlements must be approved by the SAA.

The U.S. Department of Veterans Affairs (DVA) is charged with the responsibility for administering federal programs for veterans nationwide. The Roanoke Education Services Office, under the administrative supervision of the Buffalo Regional Processing Office, is the federal office with the responsibility for veterans and federal veterans programs in Virginia

What types of programs or school must be approved?

Any educational institution which enrolls, or is likely to enroll, veterans in training programs (except for programs of Flight Training and Correspondence Courses-DVA approves those programs) must be approved or reviewed by the Virginia State Approving Agency.

Examples are:

- Colleges and universities
- Private occupational schools
- Trade and technical schools
- Training and residency programs
- High school diploma, GED or post-diploma certificate programs
- Apprenticeship and other on-the-job training programs

New accredited public and non-profit degree granting institutions are deemed approved under PL-111-337 and therefore must have a review completed by the SAA prior to receiving a Facility Code from DVA.

What needs to be approved?

It is required for all facilities to maintain approval. This application should be completed only when requesting approval of new programs, change in wage rate, withdrawing programs, change in name of programs and change in clock hours. Registered Apprenticeships must complete United States Department of Veterans Affairs Notification for New and Modified Programs (pg. 36) and Unregistered Apprenticeships and On-the-Job training programs must complete Application for Revised Program Approvals for On-the-Job Training and Apprenticeships (pg. 40).

New, Revised, Withdrawn and Teach-Out Programs

The School Certifying Official should contact their assigned Regional Manager and request an Application for Revised Program Approvals for On-the-Job Training and Apprenticeships.

Revised Programs

The school should only request an approval revision of an existing program when the following occurs:

- The program hours have changed increased/decreased
- The name of the programs has changed
- No longer being offered

Change of Address

Submit a letter (two copies) requesting approval of new address and should include the following information:

- Effective date of relocation
- New phone number, email address and points of contact
- New Designation of Certifying Official Form (VAF 22-8794)

Change of Ownership

Contact the SAA at 804-225-2720 and request an application for change of ownership.

Change of Certifying Official

Complete a new Designation of Certifying Official form (VAF 22-8794) and submit to:
Virginia State Approving Agency
900 E. Main Street, 6th Floor, West Wing

Richmond, VA 23219
Office: 804-786-0571
Fax: 804-786-0809

Types of School Visits

Compliance Surveys

The two primary purposes of compliance survey visits are:

- To assist school or training establishment officials and veterans or eligible persons in understanding the provisions and requirements of the law; and
- To verify and assure the propriety of DVA educational benefit payments to veterans and other eligible persons

Unlike inspection visits which occur at the time of initial approval, compliance surveys may be conducted annually by the State Approving Agency or DVA staff to review an institution's compliance with veterans' approval and reporting requirements. To see a list of items that will be reviewed see pages 28-30.

Technical Assistance Visits

Technical assistance visits is an interaction designed to assist a group or individual at a facility with any aspect of the approval function.

The SAA can provide, but not limited to the following training or information for your school:

- Department of Veterans Affairs (DVA) veterans benefit programs
- Enrollment certification to include VA-Once (online certification)
- Approval issues
- Commonwealth of Virginia veterans programs and benefits

To schedule a visit to your facility contact your SAA Regional Manager

Other Visits

Other visits occur when:

- DVA request the SAA to visit because of non-compliance with approval standard
- To investigate a complaint

SCHOOL AND TRAINEE RESPONSIBILITIES

School Responsibilities

The following information provides the basic responsibilities of a training establishment and DVA certifying official. Each facility will designate at least one DVA certifying official to carry out the reporting requirements. The designation will be made on DVA Form 22-8794 (Designation of School Certifying Official). It is important that a new Form 22-8794 be submitted any time there is a change in certifying officials. Each VAF 22-8794 submitted must include all names, since the new form supersedes the old one. The form may be obtained from your SAA.

Responsibilities for Reporting

Keep the DVA informed of the enrollment status of Veterans and other eligible persons. Use basic forms to keep DVA informed, such as:

- Enrollment Certification (VA Form 22-1999-side B) to report required enrollment information
- Notice of Change in Trainee Status (VA Form 22-1999b) to report changes to enrollment information
- Monitor the training agreement pursued by a trainee to certify to DVA only those training hours that apply to the trainee's program
- Monitor trainee's work performance to ensure s/he is making satisfactory progress; report when a
- Trainee was terminated due to unsatisfactory progress
- Monitor trainee's conduct and report when trainee is suspended or dismissed for unsatisfactory conduct

Keep up to date on current DVA rules and benefits

- Any changes in your contact information will require you to complete an updated VAF 22-8794
- Read and maintain DVA bulletins provided by your SAA or ELR
- Attend DVA/SAA training opportunities

Maintain records of DVA trainee's and make all records available for inspection:

- Retain files of DVA papers submitted & records of academic progress, program pursuit, etc.

- Maintain records for at least three years following the trainee's last date of employment
- Ensure that records are kept in a safe place and that the privacy of trainee is protected

A school's file for a DVA trainee should contain:

- Copies of all trainees' paperwork. It should include the following: work processes, payroll, employment contract, transcript, grade reports, records of disciplinary action, program outline, a curriculum guide or evaluation form, and any other pertinent forms

These are additional activities that training establishments are encouraged to carry out, but are not required by DVA.

- Assist trainees in applying for education benefits
- Maintain copies of application forms
- If the trainee cannot resolve payment problems, assist through DVA channels designated for school officials
- Disseminate and/or post information on DVA education benefits, programs, and contact points
- Ensure that trainees are fully aware of their responsibilities to the school

Apprise supervisors of any internal problems that may affect service to DVA trainees, such as:

- Failure of records office to provide information on a trainee's progress, payroll, or work performance changes
- Failure of training establishment to provide information on attendance/attendance problems
- Failure of mail distribution center to forward appropriate mail

Trainee Responsibilities

Applications

VA trainees can submit applications online at <http://vabenefits.vba.va.gov/vonapp/main.asp>. If trainees don't have access to apply online they can call 1-888-442-4551 and ask that an application be mailed to them. All DVA trainees must file an application before they start a training program. Trainees who haven't received DVA benefits before must file an original application (VA Form 22-1990; dependents VA Form 22-5490). Trainee who have received DVA benefits before must file a Request for Change of Program or Place of Training (VA Form 22-1995; dependents VA Form 22-5495). Trainees applying for CH 33 in lieu of (or relinquishing) another benefit should complete a VA Form 22-1990 as well.

Change of Address and Direct Deposit

Address and direct deposit information must be kept current. Chapter 30, 1606 & 1607 trainees can use the WAVE system to update address and financial institution information. Links to do so are on the "Main Menu" available after you log onto WAVE.

If a trainee wants to start (Chapter 30, 33, 35, 1606, and 1607) or change a direct deposit, the trainee should have his or her account information handy. The following information is needed to set up direct deposit and can be found on checks and bank statements:

- Account number
- 9 digit bank routing number
- Type of account (checking or savings)

If a trainee has direct deposit the trainee still needs to keep his or her address current because all other correspondence including award letters are mailed to the trainee's address.

All other trainees can call 1-877-838-2778 to begin and change direct deposit.

eBenefits

<http://www.ebenefits.va.gov>

Trainees are strongly encouraged to register and utilize eBenefits to assist them in the following:

- Obtaining up to date information on their educational entitlement

- Updating their Direct Deposit and personal contact information
- Downloading DVA letters and personal documents
- Viewing the current status of their payment (both education and disability)

Trainees can register for either a Basic or Premium account, but must be enrolled in the Defense Enrollment Eligibility Reporting System (DEERS) to obtain either account type.

EDUCATION BENEFIT PROGRAMS

GI BILL PROGRAMS

Montgomery GI Bill - Chapter 30

Individuals who entered active duty after July 1985, and participated in the pay reduction program (pay reduced \$100 a month for 12 months) and served honorably for two years or more are eligible. Veterans or service persons cannot withdraw money paid into the fund.

Veterans Affairs Vocational Rehabilitation Program - Chapter 31

This program is available to certain veterans who have a service-connected disability of 10 percent or greater. It provides a monthly stipend and also covers the cost of tuition, books and supplies. Eligibility is determined on a case-by-case basis.

Veterans Education Assistance Program (VEAP) - Chapter 32

Individuals who entered active duty service between January 1, 1977, and June 30, 1985, who served a continuous period of 181 days or more and contributed financially toward the education program, are eligible. Monthly benefits are determined by adding the amount of personal contributions and DOD contributions made during the years of active service.

GI Bill for Dependent- Chapter 35

A child or spouse of a service-connected deceased or 100 percent disabled Veteran may be eligible for VA educational benefits. Benefits may be used until the dependent has reached the age of 27 or 8 years from the date that eligibility is determined, whichever is later.

Montgomery GI Bill for Reservists - Chapter 1606

An individual who enlisted, re-enlisted, or extended an enlistment in the Selected Reserve or National Guard for a period of 6 years after July 1, 1985, and has completed the initial active duty training is eligible for VA benefits. This program does not require a contribution by the service person.

Montgomery GI Bill for Reservists - Chapter 1607

An individual who was activated after September 11, 2001, and has served at least 90 consecutive days or more in the Selected Reserve or National Guard. This program does not require a contribution by the service person.

Post 9/11 GI Bill - Chapter 33

Payment for apprenticeship and other on-the-job training program became available effective October 1, 2011.

CERTIFICATION PROCESS

Initial Packets (To begin training)

The veteran should complete an application (see Trainee Responsibility) whether online or hard copy (VA-Forms 22-1990 or 22-5490 if they have never used their educational benefits before). You may ask that a trainee provide a copy of the Certificate of Eligibility letter to ensure they are indeed eligible for the educational benefit, but is **not required**. If the veteran has used their educational benefits have them complete VA-Form 22-1995 or 22-5495.

Initial packets for the trainee's must be sent to the Virginia State Approving Agency. Packets should include:

- VA form 22-8864 (training agreement);
- VA- form 22-1999 Side B;
- Work processes; and
- Wage scale/schedule
- Apprenticeship Action Form and Training Program Outline (**Registered Apprenticeships Only**)

Packets may be sent to the SAA via US Mail (see pgs. 12-13); fax (804-786-0809); or secured/encrypted email (contact a Regional Manager to assist in setting up this process). The Regional Manager will review your packet and forward your documents to DVA on your behalf.

Trainee's Responsibility

The trainee is tasked with documenting his/her training hours via the Monthly Progress and Attendance Log (see pg.47). Recognized training hours are actual hours worked not leave hours such as sick, military, or annual leave. At the end of each month the veteran should have the training supervisor sign his Monthly Progress and Attendance Records log. By signing, the training supervisor is verifying the hours logged are accurate. The trainee should then take his log of hours to the certifying official. Then, the certifying official should verify hours against payroll to ensure hours reported are actual hours worked and have the veteran sign Monthly Certification form of On-the-Job and Apprenticeship Training (VAF 22-6553d-1, see pg. 48).

Certifying Official Responsibility

On a monthly basis the certifying official should receive the Monthly Attendance log from the trainee (as described above). The certifying official is responsible for verifying trainee's hours worked against hours sent to payroll. Record the month, year and hours

worked (e.g. March 2015, 160 hrs) onto VA form 22-6553d-1 and make sure the veteran as well as the certifying official has signed the form. The certifying official should then send this form to the DVA, so the trainee can receive payment.

Important: If the trainee completes their training before the last day of the month you must date it as the last date of the month. (e.g. I am certifying the month of March, 2015 hours; date the form as 3/31/15 or 4/2/15). This is especially important to ensure the trainee receives payment.

What documents to submit to DVA (VA forms 22-6553d-1 and 1999b):

These documents are required to send to the DVA can and will be accepted via US Mail and electronic submissions. Mailed documents will take longer to process. We highly encourage submitting documents electronically because you have a trail of the documents submitted and the DVA receives and uploads the documents the next day. Also, you are able to view once the submission/question is resolved.

Process to Submit Documents Electronically to the VA

1. Go to https://gibill.custhelp.com/app/utils/login_form/
2. Click Sign up to setup a username and password.
3. Once in the site, select the tab at the top "Ask a Question".
4. Fill in all the required fields:
 - a. Subject line: RE: veteran's name (only one veteran per question)
 - b. Question: (e.g. please upload documents for payment).
 - c. Attach document: (monthly certification form)
 - d. Product: select "GI Bill" and then "OK".
5. Select "Continue" and "Finish Submitting Question" to submit question/documentation.

BENEFIT PAYMENTS

Monthly benefit payments (or Monthly Housing Allowance for CH 33) are made directly to the trainees. The payment is made to the trainee for the number of hours the trainee is certified for the month. The trainee must work at least 120 hours per month in order to receive the full monthly payment. We suggest that vacations be scheduled in such a manner as to avoid falling below the 120-hour minimum. This

does not mean that the trainee can stop working once he or she has achieved 120 hours in a given month. The trainee must still progress at a rate to achieve enough hours to complete the program by the scheduled ending date based upon fulltime employment.

Benefits are paid after the DVA Monthly Certification of Hours Worked form has been received and processed by the appropriate DVA RPO office. Both the trainee and an authorized Certifying Official of the facility must sign and date this form.

Standard benefits are described in the monthly rate tables found at http://www.benefits.va.gov/gibill/resources/benefits_resources/rate_tables.asp. An additional kicker may be paid to some Chapter 30, 33, 1606 and 1607 trainees.

Retroactive benefits (certify as requested for all benefit Chapters)

If a trainee asks to be certified retroactively for enrollment periods you haven't certified previously, certify the previous period the trainee asks you to certify. DVA will determine the date of eligibility and the beginning date from which benefits can be paid.

RELATED TRAINING

All apprenticeship programs and some on-the-job training programs require related training. This may be given "in plant" at the company or at any vocational school. If related training is given "in plant" during the workday, the hours may not be reported as work hours. When given at a school, the school will generally send you periodic progress reports. If a trainee stops attending scheduled related training, the VA must be notified, as the trainee will no longer be entitled to benefits.

MONTHLY ATTENDANCE AND PROGRESS RECORD

The Progress Record Work Log (Registered Apprenticeships) or Monthly Attendance Log (Non-Registered Apprenticeship or On-The-Job Training) must be maintained on a monthly basis. This form must be completed in its entirety. Do not overlook the entries required in the sections titled "Hours Worked during Month" and "Instructor's Initials." The hours shown as worked on this form must match the hours reported on the VA Monthly Certification of Enrollment/VAF 22-6553d-1.

All DVA records and progress reports originating at the facility must be maintained at your company during the training and for a period of three years following the completion or termination of each trainee's program.

WAGE SCHEDULE

The wage schedule shown on the Application for Approval or Veteran Training Agreement must be followed. If a general wage increase is authorized by the facility, the new wage schedule must be reported to the SAA on the Request for Wage Revisions form or Request Application for Revised Approvals. The SAA will issue a letter amending the approval for the new wage schedule.

If the trainee's work is unsatisfactory or the attendance rate is unsatisfactory so that he or she does not earn the scheduled wage increase, it is permissible to delay the increase. This action must be fully documented and available for review by authorized officials of the DVA or the SAA. Public facilities can be exempted from incremental wage increases.

UNSATISFACTORY PROGRESS OR CONDUCT

If a trainee is discharged by the facility for unsatisfactory progress, attendance or conduct, this fact must be reported to the DVA within 30 days via DVA Form 22-1999b and or VA Form 22-6553d-1.

EXTENTION, TERMINATION, OR EARLY COMPLETION

Any time the trainee's contract is extended; terminated from the training program; or completes the program earlier than anticipated, it must be reported to DVA within 30 days.

CHANGE OF STATUS

If a veteran terminates or takes a leave of absence, it will be necessary to inform the DVA in writing to report his change of status. Any change of status must be reported within **30 days** of the date of the change to be in compliance with DVA regulations and to avoid overpayment to the claimant. Failure to comply with this regulation could lead to an adverse action on your compliance survey. A transfer to another training facility is considered a change in status. Reports of change of status may be reported on DVA Forms 22- 6553d-1 or 22-1999b (Change in Trainee Status) form.

NOTE: Sometimes DVA eligible trainees pursue benefits well after the completion of training. In cases where DVA benefits are pursued retroactively, VA will honor claims up to one year from the date they receive an application or other verifiable claim, such as a training agreement bearing the veteran's signature. Retroactive payment of benefits will include only those months of training during the past 12 months. Time prior to that must be accounted for as prior credit.

MISCELLANEOUS INFORMATION

COMPLIANCE SURVEYS

The Department of Veterans Affairs (DVA) is required by law to conduct compliance surveys at 10% of all active establishments on an annual basis. The purpose of these surveys is to make sure that all the rules and regulations are being adhered to and to help the facility wherever necessary. Authorized SAA or DVA officials will have appropriate identification and have the right to view all pertinent facility records.

What is a compliance survey?

It is the review of all DVA documents and the facility's documents that pertain to the application and payment of DVA benefits to beneficiaries. A review will be conducted for quality and accuracy of documents, certifications and progress of trainees, and an overall assessment of your training program and facility.

Record Disclosure

Can a representative from the SAA and DVA review trainee records and transcripts at your facility?

- Yes, the law provides DVA an avenue along the same lines as Financial Aid. It was determined that DVA benefits fall into the Financial Aid category and therefore is exempted from the Buckley Amendment Public Law 93-380.

How often am I reviewed?

- Generally, every one to three years is the annual review for each school if active with DVA trainees.
- A review that has a high percentage of discrepancies will prompt another visit. If there are serious or systemic problems a follow up can be scheduled within 6 six months
- New facilities will be scheduled as soon as possible, schedule permitting.

Notification procedure

- You will receive a fax, letter or email notifying you of an impending compliance survey.
- This notification will provide you with detailed information as to what trainee(s) will be reviewed.
- What documents and information needs to be provided for the compliance survey.

Major Areas of Review: Sample Agenda

I am requesting the following be prepared for each trainee listed on the enclosure:

- **OJT/Apprenticeship files:**

- Printed copies of 22-1999s, 22-1999bs and any other educational forms used to process educational benefits
- A record of previous education and/or training – credit for On-The-Job skill acquisition and previous related training
- Personnel records (application for employment, drug tests, references, certificates, related training)
- Progress records;
- Training or Apprenticeship agreement
- Copies of VAF 22-6553d-1, “Monthly Certification of On-The-Job and Apprenticeship Training.
- A copy of the Apprenticeship Action Form, and Department of Labor and Industry forms Training Program Outline

Time cards/Payroll records/Time & Leave Records *(If the records are not maintained at your location it is the responsibility of the certifying official to make sure records are available for our review either by electronic means or hard copy);*

- A copy of the pay scale from 2007 to the current date;
Time Cards – Payroll Records – Time & Leave Records – Employer Records

These records are reviewed to verify enrollment data and wages paid.

- Verify that the beginning date certified as the actual date of training;
- Verify the hours certified each month to the payroll or time & leave records;
- Verify the wages paid during the training program. For OJT programs the beginning wage must be at least 50% of the journeyman wage. The wages must be increased in regular periodic increments until, but not later than, the last full month of the training period, and at that time they will be at 85% of the journeyman wage.

Progress Records

Training records must be maintained to record the progress, conduct and attendance of each trainee.

- Verify the trainee’s progress toward the job objective (evaluation records);

- Verify the approximate amount of time spent in each task required for the training program.
- The number of hours needed by each trainee to complete the program will be determined.

Employment Application

The trainee’s employment application will be reviewed to determine if relevant training or experience was reported.

VAF 22-6553d-1, Monthly Certification of On-The-Job and Apprenticeship Training

The employer will certify the hours worked each month on this form. A copy of the form should be kept in the trainee’s file. Any changes in the wage rate should be reported on this form.

- **The total number of Apprentices** _____
- **The total number of Veteran Apprentices** _____
- **The total number of Journeymen** _____

Copies of the payroll records (wages) are routinely included with a copy of the compliance survey.

During the compliance survey **ALL** records on each of the listed trainees must be reviewed. So that the review will be as timely and efficient as possible, please arrange for a work area that will not be too disruptive to your activities.

An exit interview will be conducted after the completion of the survey.

The following is provided for your information so you are aware of the authority given to the Education Compliance Survey Specialist to review the requested information.

Examination of Records

38 U.S.C. 3690 (c); 38 CFR 21.4209

The Buckley amendment (Public Law 93-80) requires that institutions receiving Federal funds administered by the Department of Education must obtain the trainee’s consent to release information from school records. One exception to the law, however, is that information sought in connection with a trainee’s application for receipt of financial aid is exempt. It has been determined that school records relating to VA benefits fall into the “financial aid” category and are therefore exempt from the provisions of the Buckley amendment. Therefore, the VA (and SAA) shall have access to the records of VA beneficiaries as well as

non-VA trainees without the written consent of the trainee in order to monitor the school's compliance.

38 U.S.C. 3690 (c);

(c) Notwithstanding any other provision of law, the records and accounts of educational institutions pertaining to eligible veterans or eligible persons who received educational assistance under this chapter or chapter 31, 32, 34, or 35 of this title, as well as the records of other trainees which the Secretary determines necessary to ascertain institutional compliance with the requirements of such chapters, shall be available for examination by duly authorized representatives of the Government.

Note: The School certifying official is the primary contact person and has the responsibility to ensure that all requested items above are available for the compliance survey. If the school certifying official is unable to provide the requested items listed in this agenda it will reflect in the findings and reported as appropriate.

***Payroll documents are required to be made available by the facility. ***

Sample Request for Payroll Records

A routine compliance survey is being conducted at (insert name of facility) on (date). Our facility is required to maintain payroll records to verify incremental wage increases per the Commonwealth of Virginia's Department of Labor Industries (DOLI) Training Agreement, progress and attendance records as well as reconciliation of payments reported to and paid by the Department of Veterans Affairs (DVA).

I request that (insert name of company) provide payroll information on the following trainee(s)/apprentice(s) to comply with requirements as outlined below in CFR 21.4209:

First/Last Name

The following Code of Federal Regulation supports the request for examination of records.

Examination of Records - Reference CFR 21.4209(a) *Availability of records.* Notwithstanding any other provision of law, an educational institution, including for purposes of this section an organization or entity offering a licensing or certification test, must make the following records and accounts available to authorized Government representatives:

(c) *Noncollege degree, apprentice, and other on- the –job.* The educational institution having veterans, service members, reservist and /or eligible persons enrolled in a course that does not lead to a standard college degree must make available, in addition to the records of leave, absences, class cuts, makeup work, and tardiness. Each training establishment that has enrolled veterans under 38 U.S.C. chapters 30, 32 or 33, reservist under 10 U.S.C chapters 1606, or eligible persons under 38 U.S.C. chapters 35 must also make available payroll records.

(Authority: 10 U.S.C. 16136; 38 U.S.C. 3034, 3241, 3323(a), 3690)

Sincerely,

Certifying Official Name
Title

Tips for Preparing for a Compliance Survey

- Review the compliance notification that was faxed or sent to your facility
- Organize your files (DVA documentation on one side in date order, all other material on the other side, suggestion only)
- Review your files at least 3 years back! The audit will cover at least 3 years or when the trainee first enrolled in your facility.
- Self audit (if mistakes are found make the corrections before audit)
- Certify only approved programs
- Review your records often especially if there are changes with trainees. Report the adjustments even if they are late.

How Am I Informed of the Results?

- You will receive a letter providing you with the official results from the survey visit
- The inspector should discuss the discrepancies with you prior to leaving your facility. Any correctable action should be resolved at that time
- If noted discrepancies require referral action by the SAA. The Inspector should advise you of referring action to DVA before his/her departure from your facility.

ADDITIONAL REGULATIONS/INFORMATION TO BE REMEMBERED

- All files must be kept for three (3) years from the last date of attendance.
- If a veteran/employee/trainee transfers to another employer or education institution, a copy of his original DVA/SAA Forms must be retained in your facility files.
- A written statement concerning an employee's prior credit must be kept with his DVA file.
- The DVA website at www.benefits.va.gov/gibill/ shows the monthly rates received by the veteran/employee during the period he/she is training in the program.
- DVA benefits are usually scheduled to increase each October 1, based on the federal cost-of- living allowance or other consideration by Congress.
- Corrections Officers, Police Officer, Firefighter, Cooks and Steam Plant Operators are examples of approved on-the-job training programs. Other training objectives

may be approved by the Virginia SAA.

- Trainees may not draw OJT benefits and educational benefits while concurrently matriculating at a university, college or technical/trade schools, or while on active duty
- Changes in the approved wage schedule must be reported to the Virginia SAA via Revised approval application (OJT/Non-Registered Apprenticeship or Modification form for Registered Apprenticeships)
- Changes affecting the training outline must be reported to the Virginia SAA immediately to avoid possible over or underpayments to the veteran via Revised Approval Application (OJT/Non-Registered Apprenticeship or Modification form for Registered Apprenticeships). Call 804-786-0571 or 804-225-2720 to request an Application for revised approval.

FORMS

DVA Forms

| Form Name | Description |
|---|--|
| VA Form 22-1990 | Application for veterans to apply for educational benefit. Veterans can apply online at http://DVAbenefits.vba.va.gov/vonapp/main.asp |
| VA Form 22-1990e | Application for veterans who transfer their educational benefits to a dependent (spouse or child) Post 9/11 recipients only. Spouse or Child may apply online at http://DVAbenefits.vba.va.gov/vonapp/main.asp |
| VA Form 22-1995 | Trainees are required to report a change in the facility they are attending. This form can be completed online via https://www.ebenefits.va.gov |
| VA Form 22-1999-side B | This form is completed to begin the payment process for the beneficiary to receive educational benefits. |
| VA Form 22-1999b | Changes to the trainees initial 1999 must be sent via this form. |
| VA Form 22-5490 | Application for spouse or child to apply for educational benefit (Chapter 35). May apply online at http://DVAbenefits.vba.va.gov/vonapp/main.asp |
| VA Form 22-5495 | Dependent trainees (spouse or child) are required to report a change in the facility they are attending. This form can be completed online via https://www.ebenefits.va.gov |
| VA Form 22-8864 | The form is the training agreement between the veteran and company as a contract to the terms of his training. |
| VA Form 22-6553d-1 | Form to certify hours to the DVA for the trainee to receive payment on a monthly basis. |
| Monthly Progress and Attendance Record | Veteran is responsible for tracking and logging his hours worked. This should be kept in the trainees file. |
| VA-From 22-8794 | Facilities must notify the SAA and DVA when their point of contact has changed at their company. Contact the SAA or ELR for a copy of this form. |
| Modification Form for New and Modified Programs | This form is only for Registered Apprenticeships who need to make changes to their original approval and add new programs for approval. |
| Application for Revised Approval for On-the-Job Training and Apprenticeship Programs | This form is only for OJT/Non-Registered Apprenticeships to make changes to their original approval and add new programs for approval. |



United States Department of Veterans Affairs (DVA)

Notification Form for New and Modified Programs

Veterans and other eligible individuals may enroll in any education program they choose, if they meet the school's requirements for admission. However, Veterans and other eligible individuals who want to receive their GI Bill benefits must enroll in a program of education that has been deemed approved by law or that has been approved by the State Approving Agency (SAA) or the United States Department of Veterans Affairs (VA).

Courses deemed approved by Public Law 111-377, Section 203, subject to sections 3675 (b)(1) and (b)(2), 3680A, 3684, and 3696, of Title 38 U.S.C. effective August 1, 2011 are, in part:

- Flight training that is approved by the Federal Aviation Administration and offered by a certified pilot school that possesses a valid Federal Aviation Administration pilot school certificate.
- Apprenticeship program(s) registered with Office of Apprenticeship of the Employment Training Administration of the Department of Labor or a State apprenticeship agency recognized by the Office of Apprenticeship.
- Programs that lead to a secondary school diploma offered by a secondary school approved in the state in which it is operating
- A licensure test offered by a Federal, State, or local government

If a program is not deemed approved by law, the school/facility must submit an application to the SAA requesting approval of the program(s). An education program must be approved before benefits can be paid to the Veteran or other eligible individuals by the VA. Any new institution or facility and existing facilities that have programs that are not deemed approved by law should contact their SAA: <http://www.nasaa-vetseducation.com/contacts/default.aspx>

This notification form is to be used for new programs and modifications to programs at existing institutions and facilities that have programs deemed approved by law (shown above). It will assist the VA in ensuring compliance with Title 38, United States Code and appropriate regulations. This form and any questions pertaining to it would be submitted to the VA Education Liaison Representative of jurisdiction: <http://www.gibill.va.gov/school-certifying-officials/elr.html>

NOTE: VA must continue to be notified of new/modifications of flight, registered apprenticeships, licensure, and high school programs in order to properly pay benefits.

PART I – FACILITY INFORMATION

Date:
Name of School:
Mailing Address:
Physical Address:
Chief Administrative Officer/Title:
Name/Title of Contact:
Tel. # Fax #
Email Address:
Facility Code:
Effective Date of change:

School is organized as: Public Entity (City, State, or Federal)
 Non-Profit Corporation
 Other (specify) _____

Accreditation Status: Accredited
(Provide name of accrediting agency below)

Expiration Date of Accreditation: _____

Non-accredited

Facility is: Apprenticeship
 High School
 Flight School

Other: Licensure Test (Federal, State or Local Govt)

Comments:

Please see page applicable to your facility type

APPRENTICESHIP PROGRAMS

**Attach additional pages if required*

| |
|---|
| Are you reporting a change in registration status with the Office of Apprenticeship (OA) or a State apprenticeship agency? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, notify your SAA also |
| |
| |
| Are you modifying an existing program? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, list the program and explain/attach training outline if applicable |
| |
| |
| Are you adding a new program? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, list the program and attach the training outline: |
| |
| |
| |
| |
| |
| Are you reporting other changes? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, please specify change(s): |
| |
| |
| |
| |

I agree to the following conditions:

- To immediately report applicable changes to VA, such as modifications to programs, accreditation status, air agency certification, address, etc.
- To keep adequate records that show the progress and grades of the eligible person or Veteran and to show that satisfactory standards relating to progress and conduct are enforced. (see 38 USC 3675 (b)(1))
- To maintain a written record of the previous education and training of the eligible person or Veteran that clearly indicates that appropriate credit has been given by the educational institution for previous education and training, with the training period shortened proportionately. (see 38 USC 3675 (b)(2))
- To not certify eligible persons or Veterans in courses precluded such as bartending or personality development courses, courses pursued by radio, and courses avocational or recreational in character, unless the course will be of bonafide use in the pursuit of present or contemplated business or occupation. NOTE: The listing is not all-inclusive. (see 38 USC 3680A and the Code of Federal Regulations 21.4252)
- To report enrollment and any interruption or termination without delay of the education of the eligible person or Veteran. The listing is not all-inclusive. (see 38 USC 3684)
- The institution must not engage in enrollment practices of any type, which are erroneous, deceptive, or misleading either by actual statement, omission, or intimation.
- To make trainees' files available for review by representatives of the U.S. Department of Veterans Affairs and State Approving Agencies.
- To provide a certified copy of the school's catalog to VA, when changes are made. (if applicable – high schools are not required to submit catalogs)
- The school will select an employee to act as the contact person for VA, and will inform VA and complete a new VA Form 22-8794, Designation of Certifying Official when a new employee is selected.

I certify that:

The information contained in this notification form is true and correct in content and policy and I am aware that the institution or facility must comply with applicable statutes and regulations and that failure to comply may lead to suspension or withdrawal of programs by the VA.

(Signature of Administrative Official)

(Date)

(Name and Title of Administrative Official)

**DEPARTMENT OF VETERANS SERVICES
 VETERANS EDUCATION, TRAINING AND EMPLOYMENT
 ATTN: STATE APPROVING AGENCY
 900 E. MAIN STREET, 6TH FLOOR WEST WING
 RICHMOND, VIRGINIA 23219**

***Application for Revised Program Approvals
 On-the-Job Training and Apprenticeships***

Purpose: *This application should be completed only when requesting approval of new programs, change in wage rate, withdrawing programs; change in name of programs and change in clock hours. For all other request or questions regarding this application please contact the SAA Office Coordinator, Ms. Trinika Lewis-Wilson at 804-225-2720.*

| | | |
|---|-----------|--|
| Establishment Name: | | Date of Request: |
| Address 1: | | Type of Facility: |
| Address 2: | | <input type="checkbox"/> Apprenticeship |
| City: | | <input type="checkbox"/> On-The-Job Training |
| State: | Zip Code: | Training Establishment Status |
| Facility Code: | | <input type="checkbox"/> Public <input type="checkbox"/> Private |
| Is this a new address? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Are you registered with DOLI? <input type="checkbox"/> Yes <input type="checkbox"/> No |

General Information

| | |
|---|--|
| Official (s) who will serve as Contact person for approval: | Effective Start Date of Programs: |
| Phone: Fax: E-mail: | # of Veterans enrolled or waiting to enroll: |

All Training Establishments (including Deemed Approved)

Training Establishments are required to submit any changes in status, such as;

1. Change in address
2. Changes in wage rates
3. Change in status with the Department of Labor and Industry (DOLI)
4. Closure of Establishment

Type of Action Requested

Please check the following item(s) that you are requesting approval:

| | |
|---|--|
| <input type="checkbox"/> New Program | <input type="checkbox"/> Change in Training Hours |
| <input type="checkbox"/> Program Withdrawal | <input type="checkbox"/> Program Name Change |
| <input type="checkbox"/> Policy Change | <input type="checkbox"/> Change in Wage Rate |
| | Old Wage Rate: New Wage Rate: <i>(Attached supporting documentation as needed)</i> |

Remarks/Comments:

DESIGNATION OF CERTIFYING OFFICIAL(S)

GENERAL INSTRUCTIONS

1. This form **MUST ONLY** be completed by a responsible official with the authority to designate certifying officials for the school or training establishment.
2. This form must be completed whenever there is a change in any of the information. Include the names, titles, and signatures of all certifying officials, not just the changed information.

SPECIFIC INSTRUCTIONS

1. Item 1: Enter the complete name and address of the school or training establishment.
2. Item 2: Enter the certifying official's telephone number.
3. Item 3: Enter the certifying official's fax number.
4. Item 4: Enter the certifying official's e-mail address. As an alternative, you may enter the e-mail address for the office where the certifying official works.
5. Item 5A: Enter the complete name and title for each designated certifying official. Have each person sign the form on the same line as his or her name and title. If any of the certifying officials have limited jurisdiction, note such limitations in Item 6, "Remarks". Use space below if needed.
6. Item 5B: If facsimile (e.g., rubber stamp) signatures will be used for any certifying officials, enter a sample in the appropriate block. In addition, have the individual initial next to the sample.
7. Item 5C: If veterans and other eligible persons will be claiming individualized tutorial assistance, complete these blocks.
8. Items 7 and 8: Sign and date the form. The person signing the form must be a person of significant authority, i.e., registrar, academic dean, or higher.

PURPOSE: This form is used to provide the names and signatures of those individuals who are authorized to certify enrollment information to the Department of Veterans Affairs.

| | |
|---|--|
| 1. NAME AND ADDRESS OF SCHOOL OR TRAINING ESTABLISHMENT <i>(Include ZIP Code)</i> | FOR VA USE ONLY |
| 2. TELEPHONE NUMBER(S) OF CERTIFYING OFFICIAL(S) <i>(Include Area Code)</i> | 3. FAX NUMBER OF CERTIFYING OFFICIAL(S) <i>(Include Area Code)</i> |

4. E-MAIL ADDRESS OF CERTIFYING OFFICIAL(S)

5. THE FOLLOWING ARE DESIGNATED AS CERTIFYING OFFICIALS OF THIS SCHOOL OR TRAINING ESTABLISHMENT

A. OFFICIALS DESIGNATED TO SIGN VA ENROLLMENT CERTIFICATIONS, CERTIFICATIONS OF CHANGE IN STUDENT STATUS, CERTIFICATIONS OF DELIVERY OF ADVANCE PAYMENTS, CERTIFICATIONS OF PURSUIT, ATTENDANCE, FLIGHT TRAINING, ON-THE-JOB OR APPRENTICESHIP TRAINING (AS APPLICABLE), OTHER CERTIFICATIONS OF ENROLLMENT ARE:

| NO. | NAME | TITLE | SIGNATURE |
|-----|------|-------|-----------|
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |

B. THE USE OF THE FOLLOWING FACSIMILE (e.g., rubber stamp) SIGNATURES FOR THE OFFICIALS LISTED IN ITEM 5A ABOVE ARE AUTHORIZED.

| | | | |
|-----|--|-----|--|
| (1) | | (2) | |
| (3) | | (4) | |



TRAINING AGREEMENT FOR APPRENTICESHIP AND OTHER ON-THE-JOB TRAINING PROGRAMS (Title 38 U.S.C. 3677 and 3687)

PART I - GENERAL INFORMATION

1. NAME AND ADDRESS OF ESTABLISHMENT ENTERING INTO TRAINING AGREEMENT (Include e-mail address)
2. NAME AND ADDRESS OF TRAINEE ENTERING INTO TRAINING AGREEMENT
3. TRAINEE'S SOCIAL SECURITY NUMBER
4. TRAINEE'S VA FILE NUMBER
5. DATE OF BIRTH
6. TRAINEE'S JOB TITLE OR TRADE
7. LENGTH OF PROGRAM
8. CREDIT FOR PREVIOUS TRAINING/EXPERIENCE
9. LENGTH OF TIME REMAINING TO BE COMPLETED
10. DATE TRAINING BEGINS
11. LENGTH OF PROBATIONARY PERIOD
FOR VA USE ONLY
12. FACILITY CODE
13. DOT CODE

PART II - TRAINING AGREEMENT

14. SPECIFIC QUALIFICATIONS FOR TRAINEES
15. NUMBER OF TRAINEES PER INSTRUCTOR OR NUMBER OF APPRENTICES TO JOURNEY WORKERS (Ratio)

16. WAGE PROGRESSION TOWARD THE JOURNEYWORKER WAGE

NOTE: Trainees who receive credit for previous experience shall be paid the wage rate of the period to which such credit advances them.

Table with 6 columns: A. PERIOD, B. NUMBER OF MONTHS, C. WAGE LEVEL, A. PERIOD, B. NUMBER OF MONTHS, C. WAGE LEVEL. Rows for 1ST through 5TH periods.

D. PRESENT FULLY TRAINED WAGE RATE OR JOURNEYWORKER WAGE RATE

\$ PER

17A. WORK PROCESSES IN WHICH TRAINEE WILL RECEIVE INSTRUCTION OR WILL BE TRAINED (List the various operations or tasks to be learned with a brief narrative description and the length of time devoted to each. If additional space is required, please continue on a separate sheet)
17B. NUMBER OF HOURS OF TRAINING
TOTAL

18A. COURSE CURRICULUM UNITS, OR TRAINING OUTSIDE THE JOB NECESSARY FOR THIS TRADE (If required)
18B. LOCATION OF RELATED TRAINING/INSTRUCTION

The Establishment and the Trainee enter into this agreement in conformity with the Training Standards shown on the reverse side of this form which have been approved by the Department of Veterans Affairs. Carefully read these standards before signing below.

19. SIGNATURE OF TRAINEE
20. SIGNATURE AND TITLE OF ESTABLISHMENT DESIGNEE

The signing of this agreement binds the parties to compliance with the Agreement and Training/Apprenticeship Standards.

OTHER ON-THE-JOB TRAINING STANDARDS

- I. HOURS AND SUPERVISION - The trainee shall work the same hours as the instructor and shall work under the supervision of the instructor at all times.
- II. SAFETY AND HEALTH TRAINING - The VA trainee will receive instruction on the job as to safe and healthful work practices. Such instruction shall include training regarding safety regulations, reporting of accidents, and availability of first aid medical facilities. The establishment shall also ensure that the trainee is trained in facilities and other environments that are safe and healthful.
- III. ADMINISTRATIVE PROCEDURES - The following shall be the responsibility of the participating establishment:
 - A. To see that all VA trainees are covered by a written agreement.
 - B. To notify the VA Regional Processing Office in writing of any interruption or termination of training by each VA trainee.
 - C. To maintain a record of each VA trainee showing his or her experience and progress in learning the occupation until 3 years after completion of the training program.
- IV. COMPLIANCE WITH TITLE VI, CIVIL RIGHTS ACT OF 1964 - The establishment agrees to comply with the provisions of Title VI, Civil Rights Acts of 1964.
- V. COMPLIANCE WITH TRAINING STANDARDS - These standards, as approved by VA, become a part of the Training Agreement applying hereto. The signing of the Agreement in Items 19 and 20 on the reverse, binds the parties to compliance with these standards. The employer will provide every VA trainee entering into an Other On-The-Job Training Agreement with a copy of the Agreement with these Standards. The employer will send two copies of the completed Agreement to VA. The terms of this training agreement are in compliance with the requirements of section 21.4262, Title 38, Code of Federal Regulations.

APPRENTICESHIP TRAINING STANDARDS

- I. DEFINITION AND TERM OF APPRENTICESHIP - The term "apprentice" shall mean a person at least _____ years of age who is employed to learn a skilled trade pursuant to the terms of a written Apprenticeship Agreement with the establishment. The Agreement will provide for (a) not less than _____ years of reasonably continuous employment, (b) participation of the apprentice in an approved schedule of work experience through employment, and (c) at least the number or hours per year of supplemental instruction in subjects related to the trade specified by the U.S. DOL (Department of Labor). (The DOL usually requires at least 144 hours per year.)
 - II. QUALIFICATIONS OF APPRENTICESHIP APPLICANTS - VA apprenticeship applicants for this trade shall be between the ages of _____ and _____ and should be, if possible, high school graduates or the equivalent and be able to meet the requirements of the trade.
 - III. PROBATIONARY PERIOD - All apprentices employed in accordance with these standards shall be subject to a probationary period not exceeding the first _____ of the term of apprenticeship. During this period, the Apprenticeship Agreement may be terminated at the request of either party to the Agreement.
 - IV. HOURS AND SUPERVISION - The apprentice shall work the same hours as the journeyworker and shall work under the supervision of the journeyworker at all times.
 - V. WAGE PROGRESSION - This standard must include a uniform, progressive schedule of wages.
 - VI. RELATED SCHOOL INSTRUCTION
 - A. Each apprentice shall enroll in and attend classes in subjects related to this trade for not less than the number of hours yearly specified by the U.S. DOL during the term of apprenticeship. Apprentice related training should be arranged through local education agencies, the Community College system, or private vocational schools. If institutional training is not available locally, such related training may be given by a course applicable to the trade taken through correspondence (or other forms of self-study approved by the registration/approval agency), or an individualized instruction program of classroom training in the training establishment will be substituted.
 - B. Failure on the part of the apprentice to regularly attend class and/or progress satisfactorily in approved related training will be deemed sufficient cause to drop the apprentice from the entire training program.
 - C. Trade journals, manuals, books, publications, etc., applicable to the trade may be used in supervised training.
 - D. The minimum number of related training hours per year are not classified as hours of employment unless given during regular working hours for which wages are paid.
 - E. Curriculum content is described in Items 18A and 18B of the Apprenticeship Agreement.
 - VII. SAFETY AND HEALTH TRAINING - The apprentice shall receive instruction on the job as to safe and healthful work practices. Such instruction shall include training regarding safety regulations, reporting of accidents, and availability of first aid medical facilities.
 - VIII. ADMINISTRATIVE PROCEDURES - The following shall be the responsibility of the participating establishment:
 - A. To see that all apprentices are covered by a written agreement.
 - B. To notify the VA Regional Processing Office in writing of any interruption or termination of training by each apprentice.
 - C. To maintain a record of each apprentice showing his or her experience and progress in learning the occupation until 3 years after completion of the training program.
 - IX. GRANTING CERTIFICATE OF COMPLETION OF APPRENTICESHIP - After satisfactory completion of apprenticeship under these standards, each apprentice shall be furnished with a Certificate of Completion of Apprenticeship.
 - X. COMPLIANCE WITH TITLE VI, CIVIL RIGHTS ACT OF 1964 - The establishment agrees to comply with the provisions of Title VI, Civil Rights Act of 1964.
 - XI. COMPLIANCE WITH APPRENTICESHIP STANDARDS - These standards, as approved by VA, are made a part of the Apprenticeship Agreement applying hereto. The signing of the Agreement in Items 19 and 20 on the reverse, binds the parties to compliance with these standards.
- OTHER INFORMATION - Every apprentice entering into an Apprenticeship Training Agreement will be given a copy of these standards. Two copies will be forwarded to VA. The terms of this training agreement are in compliance with the requirements of section 21.4261, Title 38, Code of Federal Regulations.

Education Liaison Representative

Date Signed

MONTHLY PROGRESS AND ATTENDANCE RECORD

Apprenticeship and On-The-Job Training Programs

(To be kept on file at company Office)

VETERAN _____ MONTH/YEAR _____

AREA OF TRAINING TAKEN FROM BREAKDOWN OF WORK PROCESSES

| DAY OF MONTH/WEEK | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | TOTAL |
|-------------------|---|---|---|---|---|---|---|---|---|----|-------|
| 1 | | | | | | | | | | | |
| 2 | | | | | | | | | | | |
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| 29 | | | | | | | | | | | |
| 30 | | | | | | | | | | | |
| 31 | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | |

I certify the above hours have been satisfactory worked in the area as indicated

Signature of Supervisor



Department of Veterans Affairs

NOTICE OF CHANGE IN STUDENT STATUS

| | | | | |
|---|--|---|--|--|
| 1. NAME OF STUDENT <i>(First, Middle, Last)</i> | | 2. VA FILE NO. <i>(For chapter 35, include suffix. For transferability cases, enter the veteran's Social Security Number)</i> | | |
| 3. CURRENT ADDRESS OF STUDENT | | 4. SOCIAL SECURITY NO. OF APPLICANT <i>(If not entered on Item 2 above)</i> | | |
| 5. DATES OF TERM AFFECTED | | | | |
| A. BEGIN DATE | | B. END DATE | | |
| 5. TERMINATION <i>(Complete Items A and B, and C if applicable)</i> | | | | |
| A. LAST DATE OF ATTENDANCE | B. REASON FOR TERMINATION <input type="checkbox"/> WITHDRAWAL BEFORE BEGINNING OF TERM <input type="checkbox"/> WITHDRAWAL DURING DROP PERIOD <input type="checkbox"/> WITHDRAWAL AFTER DROP PERIOD - NONPUNITIVE GRADES ASSIGNED <i>(If checked, complete Item 9 & 11)</i> <input type="checkbox"/> WITHDRAWAL AFTER DROP PERIOD - PUNITIVE GRADES ASSIGNED <input type="checkbox"/> END OF TERM OR COURSE <input type="checkbox"/> UNSATISFACTORY ATTENDANCE, CONDUCT, OR PROGRESS <input type="checkbox"/> GRADUATION <input type="checkbox"/> WITHDRAWAL OR INTERRUPTION <i>(Noncollege Degree Programs not on term basis- see Instructions)</i> <input type="checkbox"/> OTHER <i>(Explain in Item 12, Remarks)</i> | | | |
| C. LAST DATE CREDIT ACCRUED <i>(For non-college degree courses only)</i> | | | | |
| 7. ADJUSTMENT OF CREDIT OR CLOCK HOURS <i>(Complete Items A, B, and C thru H as applicable)</i> | | | | |
| A. DATE ADJUSTMENT IS EFFECTIVE | B. TYPE OF ADJUSTMENT <input type="checkbox"/> INCREASE <input type="checkbox"/> INCREASE ON FIRST DAY OF TERM <input type="checkbox"/> REDUCTION ON FIRST DAY OF TERM <input type="checkbox"/> REDUCTION DURING DROP PERIOD <input type="checkbox"/> REDUCTION AFTER DROP PERIOD - NONPUNITIVE GRADES ASSIGNED <i>(If checked, complete Item 9 & 11)</i> <input type="checkbox"/> REDUCTION AFTER DROP PERIOD - PUNITIVE GRADES ASSIGNED <input type="checkbox"/> STUDENT COMPLETED TERM, BUT NONPUNITIVE GRADES ASSIGNED FOR ONE OR MORE COURSES <i>(If checked, complete Item 8)</i> <input type="checkbox"/> REDUCTION <i>(Noncollege Degree Programs not on term basis- see Instructions)</i> <input type="checkbox"/> OTHER <i>(Explain in Item 9, Remarks)</i> | | | |
| C. CREDIT HOURS BEFORE ADJUSTMENT | | D. CREDIT HOURS AFTER ADJUSTMENT | | E. TRAINING TIME AFTER ADJUSTMENT <i>(For graduate and advanced professional)</i> <input type="checkbox"/> FULL TIME <input type="checkbox"/> 3/4 TIME <input type="checkbox"/> 1/2 TIME <input type="checkbox"/> LESS THAN 1/2 TIME <input type="checkbox"/> 1/4 TIME OR LESS |
| F. CLOCK HOURS OR HIGH SCHOOL UNITS BEFORE ADJUSTMENT | | G. CLOCK HOURS OR HIGH SCHOOL UNITS AFTER ADJUSTMENT | | H. REVISED ENDING DATE |
| 8. CHARGES FOR PERIOD OF ENROLLMENT <i>(Complete this item for in-service students, student's whose training load after adjustment is less than 1/2 time and all chapter 33 students that have a change in status. List the charges for the adjusted load by school year, term, or other period. This item does not apply to students receiving chapter 32 or 1606 benefits).</i> | | | A. TUITION \$ | B. FEES \$ |
| 9. DO PREVIOUS CERTIFICATIONS FOR SUBSEQUENT TERMS REMAIN UNCHANGED? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | C. YELLOW RIBBON <i>(Chapter 33 only)</i> \$ 10. CALLUP TO ACTIVE DUTY <i>(Complete if student called to active duty- see Instructions)</i> <input type="checkbox"/> STUDENT CALLED UP - No Credit Granted <input type="checkbox"/> STUDENT CALLED UP - Credit Granted | |
| MITIGATING CIRCUMSTANCES <i>(Complete only if indicated by Item 6 or 7)</i> | | | | |
| 11. DOES THE STUDENT CLAIM THAT TERMINATION OR ADJUSTMENT ACTIONS INVOLVED MITIGATING CIRCUMSTANCES? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN <i>(If "Yes," attach student's statement together with the student's supporting evidence)</i> | | | | |
| 12. REMARKS | | | | |
| IT IS HEREBY CERTIFIED THAT the student's status changed on the date indicated and in accordance with the facts shown above. | | | | |
| 13A. DATE | 13B. SIGNATURE AND TITLE OF CERTIFYING OFFICIAL | | 13C. NAME AND ADDRESS OF SCHOOL OR TRAINING ESTABLISHMENT <i>(Include Facility Code)</i> | |

REGIONAL PROCESSING OFFICE (RPO) NAME AND ADDRESS OR FAX NUMBER
 (See RPO listing on reverse)



MONTHLY CERTIFICATION OF ON-THE-JOB AND APPRENTICESHIP TRAINING

VA FILE NUMBER _____ PAYEE _____

TRAINEE'S NAME AND ADDRESS

IMPORTANT: Read the instructions carefully. You and the employer should complete, date, and sign this form on or after the last day of the last month shown in Item 1. Call 1-888-GI-BILL-1 (1-888-442-4551), if you have questions. If you use the Telecommunications Device for the Deaf (TDD) call the Federal Relay number is 711.

INSTRUCTIONS TO TRAINEE

ITEMS 1 AND 2 - Enter the number of hours worked for each month/year shown (include any hours of related training given during working hours). Do **NOT** include overtime hours.

ITEM 3 - Check the appropriate box, and if training has been terminated, complete Items 4 and 5. If you have attained the complete job skills for your job (a "journeyman" knowledge and skills), show this information in Item 5.

ITEMS 6A, 6B, AND 6C - Check the appropriate box. If you received a wage increase (or decrease) not in accordance with your training agreement, show your new wage rate and the effective date of that wage rate (when you first received this wage rate).

ITEM 7 - Use Item 7, Remarks, to show any additional information concerning your wage rate. Also, if you are receiving additional educational allowance for dependents use this item to report any change in the number of your dependents.

ITEMS 8A and 8B - Sign and date the form. After signing and dating the form give it to your employer/certifying official or an authorized official of your training establishment for verification.

CHANGE OF ADDRESS - If you are changing your address permanently, neatly line out the preprinted address shown above. Then, print or type your new address in the remaining space. Be sure to include your ZIP Code.

INSTRUCTIONS TO EMPLOYER/CERTIFYING OFFICIAL

Please verify the number of hours worked and other information reported by the trainee in Items 1 through 6 with the payroll and training records. Please report any differences in Items 6 and/or 7.

Also use Item 7 if the trainee's conduct or progress is unsatisfactory or if the trainee has attained the complete job skills for the job (a "journeyman" knowledge and skills).

ITEMS 9A and 9B - Sign and date the form and return it to the VA office shown above.

If you have any questions, call VA toll-free at 1-888-GI Bill (1-888-442-4551).

| 1. MONTH(S)/YEAR TO BE CERTIFIED | 2. NUMBER OF HOURS WORKED FOR EACH MONTH SHOWN IN ITEM 1 | 3. WAS TRAINEE ENROLLED IN AND PURSUING THE APPROVED PROGRAM FOR THE MONTH(S) SHOWN IN ITEM 1? | 4. DATE TERMINATED (Month, day, year) |
|----------------------------------|--|--|--|
| | | <input type="checkbox"/> YES | |
| | | <input type="checkbox"/> NO (If "No," complete Items 4 and 5) | |
| | | 5. REASON FOR TERMINATION | |
| | | 6A. IS WAGE RATE IN ACCORDANCE WITH TRAINING AGREEMENT? | 6B. RATE |
| | | <input type="checkbox"/> YES | 6C. EFFECTIVE DATE |
| | | <input type="checkbox"/> NO (If "No," complete Items 6B and 6C) | |

7. REMARKS

I CERTIFY THAT the previous statements are true and correct to the best of my knowledge and belief.

PENALTY - Willful false reports concerning benefits payable by VA may result in fines or imprisonment or both.

8A. SIGNATURE OF TRAINEE (Please sign in ink) _____ 8B. DATE SIGNED _____

9A. SIGNATURE AND TITLE OF CERTIFYING OFFICIAL (Please sign in ink) _____ 9B. DATE SIGNED _____

FILE NUMBER:



REQUEST FOR CHANGE OF PROGRAM OR PLACE OF TRAINING

PART I - IDENTIFICATION AND PERSONAL INFORMATION

| | | | | | | |
|---|---|--|--|--|--|--|
| 1A. NAME OF APPLICANT <i>(First, Middle, Last)</i> | | VA DATE STAMP DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | | |
| 1B. MAILING ADDRESS <i>(Complete street address, City, State, and 9-digit ZIP Code)</i> | | | | | | |
| | | | | | | |
| 1C. APPLICANT'S TELEPHONE NUMBER <i>(Including Area Code)</i> | 1D. VA FILE NUMBER | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">DAY</td> <td style="width: 50%; text-align: center;">EVENING</td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table> | DAY | EVENING | | | | |
| DAY | EVENING | | | | | |
| | | | | | | |
| 1E. APPLICANT'S E-MAIL ADDRESS | 1F. SOCIAL SECURITY OF APPLICANT <i>(For transferability cases, enter the veteran's social security number)</i> | | | | | |
| | | | | | | |

PART II - YOUR PROGRAM INFORMATION

| | | |
|---|---|--|
| 2. EDUCATION BENEFIT YOU WANT TO RECEIVE <i>(Only Select One)</i> | | |
| A. <input type="checkbox"/> CHAPTER 33 <i>(Post-9/11 GI BILL)</i> | C. <input type="checkbox"/> CHAPTER 32 <i>(Veterans Educational Assistance Program including section 903)</i> | E. <input type="checkbox"/> CHAPTER 1607 <i>(Reserve Educational Assistance Program)</i> |
| B. <input type="checkbox"/> CHAPTER 30 <i>(Montgomery GI Bill - Active Duty)</i> | D. <input type="checkbox"/> CHAPTER 1606 <i>(Montgomery GI Bill- Selected Reserve)</i> | F. <input type="checkbox"/> TRANSFER OF ENTITLEMENT PROGRAM |
| 3. HOW WILL YOU TAKE TRAINING? | | |
| A. <input type="checkbox"/> SCHOOL ATTENDANCE | D. <input type="checkbox"/> COOPERATIVE TRAINING | G. <input type="checkbox"/> LICENSING & CERTIFICATION TEST |
| B. <input type="checkbox"/> CORRESPONDENCE | E. <input type="checkbox"/> TUITION ASSISTANCE TOP-UP <i>(Active Duty Only)</i> | H. <input type="checkbox"/> NATIONAL ADMISSIONS EXAMS OR NATIONAL EXAMS FOR CREDIT |
| C. <input type="checkbox"/> APPRENTICESHIP OR ON-THE-JOB TRAINING | F. <input type="checkbox"/> FLIGHT TRAINING | |
| 4A. WHAT EDUCATION, PROFESSIONAL OR VOCATIONAL GOAL ARE YOU WORKING TOWARD? | 4B. WHAT IS THE NAME OF THE PROGRAM YOU ARE REQUESTING? | |
| | | |
| 4C. IF CHANGING SCHOOLS, GIVE NAME AND COMPLETE ADDRESS OF NEW SCHOOL OR TRAINING ESTABLISHMENT YOU ARE PLANNING TO ATTEND <i>(If applicable)</i> | 4D. NAME AND COMPLETE ADDRESS OF OLD OR CURRENT SCHOOL OR TRAINING ESTABLISHMENT | |
| | | |
| 4E. TELL US WHEN AND WHY YOU STOPPED TRAINING AT YOUR PRIOR SCHOOL OR ESTABLISHMENT. CONTINUE IN REMARKS, ITEM 10, OR ON A SEPARATE SHEET IF NECESSARY. | | |
| | | |

PART III - DIRECT DEPOSIT INFORMATION

| | | |
|---|--------------------------------------|-------------------|
| 5. DIRECT DEPOSIT <i>(Attach a voided personal check or provide the information in items A through D below. Direct Deposit is not available for Chapter 32 recipients. See instructions for additional Direct Deposit information.)</i> | | |
| A. TYPE OF ACCOUNT | | |
| <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS | | |
| B. NAME OF FINANCIAL INSTITUTION | C. 9 DIGIT ROUTING OR TRANSIT NUMBER | D. ACCOUNT NUMBER |
| | | |

PART IV - MISCELLANEOUS INFORMATION

6. INFORMATION ON DEPENDENTS (*COMPLETE THIS ITEM ONLY IF YOU SERVED BEFORE JANUARY 1, 1977 (or had a delayed entry before January 2, 1978) AND YOU CURRENTLY HAVE DEPENDENTS.*)

| QUESTIONS | YES (✓) | NO (✓) |
|--|--------------------------|--------------------------|
| A. ARE YOU CURRENTLY MARRIED? | <input type="checkbox"/> | <input type="checkbox"/> |
| B. DO YOU HAVE ANY CHILDREN WHO ARE : | | |
| (1) UNDER AGE 18 OR | <input type="checkbox"/> | <input type="checkbox"/> |
| (2) OVER 18 BUT UNDER AGE 23, NOT MARRIED AND ATTENDING SCHOOL? OR | <input type="checkbox"/> | <input type="checkbox"/> |
| (3) OF ANY AGE PERMANENTLY HELPLESS FOR MENTAL OR PHYSICAL REASONS? | <input type="checkbox"/> | <input type="checkbox"/> |
| C. IS EITHER YOUR FATHER OR MOTHER DEPENDENT UPON YOU FOR FINANCIAL SUPPORT? | <input type="checkbox"/> | <input type="checkbox"/> |

7. RECENT PERIODS OF SERVICE (PERIODS OF ACTIVE DUTY SINCE YOUR INITIAL PERIOD OF ACTIVE DUTY.) Please complete this section for each period of your active duty since your initial period of active duty if you have not previously reported this information. It will help VA process your claim if you attach a certified copy of "Member 4 Copy" of your DD Form 214 for **each period** of active service. (*Don't report Active Duty for Training.*)

| A. BRANCH OF SERVICE AND RESERVE OR GUARD COMPONENT SERVED IN DURING ACTIVE DUTY | B. BEGINNING AND ENDING DATES OF ACTIVE DUTY | C. WERE YOU INVOLUNTARILY CALLED TO ACTIVE DUTY FOR THIS PERIOD? (<i>If yes send in copies of your orders</i>) | | D. WHAT WAS THE CHARACTER OF YOUR DISCHARGE? | E. IF THIS ACTIVE DUTY IS NATIONAL GUARD DUTY, INDICATE IF AUTHORITY IS TITLE 10 (FEDERAL) OR TITLE 32 (STATE). (<i>ATTACH COPIES OF ANY ORDERS</i>) |
|--|--|--|--------------------------|--|--|
| | | YES (✓) | NO (✓) | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |

NOTE: DO NOT INCLUDE FULL TIME ASSIGNMENT BY A SERVICE DEPARTMENT TO A CIVILIAN SCHOOL FOR A COURSE OF EDUCATION; ATTENDANCE AT A SERVICE ACADEMY; OR NON-CREDITABLE TIME (TIME LOST BECAUSE OF INDUSTRIAL OR AGRICULTURAL FURLOUGH, ARREST WITHOUT ACQUITTAL, BEING AWOL, DESERTION, SENTENCE OF COURT-MARTIAL, ETC.)

8. DO YOU EXPECT TO RECEIVE EDUCATIONAL BENEFITS UNDER THE GOVERNMENT EMPLOYEE'S TRAINING ACT (GETA) FOR THE SAME COURSE(S) YOU WILL RECEIVE VA EDUCATION BENEFITS? (*Answer only if you are a Federal Government employee*)

YES NO

9. ARE YOU RECEIVING OR DO YOU ANTICIPATE RECEIVING ANY MONEY (including but not limited to Federal Tuition Assistance) FROM THE ARMED FORCES OR PUBLIC HEALTH SERVICE FOR THE COURSE FOR WHICH YOU HAVE APPLIED TO VA FOR EDUCATION BENEFITS? IF YOU WILL RECEIVE SUCH BENEFITS, CHECK "YES." SHOW COMPLETE DETAILS IN THE REMARKS SECTION TO INCLUDE THE SOURCE OF THE FUNDS. NOTE: IF YOU ARE APPLYING FOR THE TUITION ASSISTANCE TOP-UP BENEFIT, CHECK "NO." (*Answer only if you are on Active Duty*)

YES NO

10. REMARKS

PART V - CERTIFICATION AND SIGNATURE OF APPLICANT

I CERTIFY THAT all statements in my application are true and correct to the best of my knowledge and belief. If on active duty, I also certify that I have consulted with an Education Service Officer (ESO) regarding my education program.

PENALTY - Willful false statements as to a material fact in a claim for education benefits is a punishable offense and may result in the forfeiture of these or other benefits and in criminal penalties.

11A. SIGNATURE OF APPLICANT (DO NOT PRINT)

SIGN HERE IN INK ▶

11B. DATE SIGNED

INTERNET VERSION AVAILABLE - You may complete and send your application over the Internet at: www.gibill.va.gov

PART I - APPLICANT INFORMATION

| | | |
|--|--|---|
| 1. SOCIAL SECURITY NUMBER OF APPLICANT <input style="width:100%;" type="text"/> | 2. SEX OF APPLICANT <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE | 3. APPLICANT'S DATE OF BIRTH Month <input style="width:20px;" type="text"/> — Day <input style="width:20px;" type="text"/> — Year <input style="width:40px;" type="text"/> |
|--|--|---|

4. NAME (First, Middle Initial, Last)

5. APPLICANT'S ADDRESS

Number and Street

Apt./Unit Number

City, State, ZIP Code

6A. APPLICANT'S TELEPHONE NUMBERS (Include Area Code)

Primary: Secondary:

6B. APPLICANT'S E-MAIL ADDRESS (If applicable)

7. DIRECT DEPOSIT (Attach a voided personal check or provide the following information. Direct Deposit is not available for Chapter 32 recipients. See instructions for additional Direct Deposit information.)

| | | |
|---|--|--|
| Routing or Transit Number <input style="width:100%;" type="text"/> | Account Type Checking <input type="checkbox"/> Savings <input type="checkbox"/> | Account Number <input style="width:100%;" type="text"/> |
|---|--|--|

8. PLEASE PROVIDE THE NAME, ADDRESS, AND PHONE NUMBER OF SOMEONE WHO WILL ALWAYS KNOW WHERE YOU CAN BE REACHED

| A. NAME | B. ADDRESS | C. PHONE NUMBER |
|--|--|--|
| <input style="width:100%;" type="text"/> | <input style="width:100%;" type="text"/> | <input style="width:100%;" type="text"/> |

PART II - EDUCATION BENEFIT BEING APPLIED FOR See instructions for benefit eligibility criteria

9A. Chapter 33 - Post-9/11 GI Bill (Complete 9F if you are eligible for chapter 30, chapter 1606, or chapter 1607)

9B. Chapter 30 - Montgomery GI Bill Educational Assistance Program (MGIB)

9C. Chapter 1606 - Montgomery GI Bill - Selected Reserve Educational Assistance Program (MGIB-SR)

9D. Chapter 1607 - Reserve Educational Assistance Program (REAP)

9E. Chapter 32 or Section 903 - Post-Vietnam Era Veterans' Educational Assistance Program (VEAP)

9F. By electing Chapter 33, I acknowledge that I understand the following:

- I may not receive more than a total of 48 months of benefits under two or more programs.
- If electing chapter 33 in lieu of chapter 30, my months of entitlement under chapter 33 will be limited to the number of months of entitlement remaining under chapter 30 on the effective date of my election.
- My election is **irrevocable** and may not be changed.

I elect to receive chapter 33 education benefits in lieu of the education benefit checked below, effective (date)

I understand that my election is irrevocable and may not be changed. (Check only one)

Chapter 30 - Montgomery GI Bill Educational Assistance Program (MGIB)

Chapter 1606 - Montgomery GI Bill - Selected Reserve Educational Assistance Program (MGIB-SR)

Chapter 1607 - Reserve Educational Assistance Program (REAP)

PART III - TYPE AND PROGRAM OF EDUCATION OR TRAINING

10A. TYPE OF EDUCATION OR TRAINING (See instructions for additional information)

| | |
|---|---|
| <input type="checkbox"/> COLLEGE OR OTHER SCHOOL (Including on-line courses) | <input type="checkbox"/> APPRENTICESHIP OR ON-THE-JOB |
| <input type="checkbox"/> VOCATIONAL FLIGHT TRAINING | <input type="checkbox"/> CORRESPONDENCE |
| <input type="checkbox"/> NATIONAL TEST REIMBURSEMENT (SAT, CLEP, ETC.) | <input type="checkbox"/> TUITION ASSISTANCE TOP-UP (Chapter 30 & 33 only) |
| <input type="checkbox"/> LICENSING OR CERTIFICATION TEST REIMBURSEMENT (MCSE, CCNA, EMT, NCLEX, ETC.) | |

VA DATE STAMP
(Do Not Write In This Space)

10B. PROVIDE THE FULL NAME AND ADDRESS OF THE SCHOOL, IF KNOWN (Skip this item if you are only applying for National Test Reimbursement, Licensing and Certification Test Reimbursement, or Tuition Assistance Top-Up)

10C. PLEASE SPECIFY YOUR EDUCATIONAL OR CAREER OBJECTIVE, IF KNOWN (e.g. Bachelor of Arts in Accounting, welding certificate, police officer, etc.)

PART IV - SERVICE INFORMATION

NOTE: It will help VA process your claim if you send a copy of the following:

- DD Form 214 (Member 4) for all periods of active duty service (excluding active duty for training)
- DD Form 2384, Notice of Basic Eligibility (NOBE) if applying for Chapter 1606
- Copies of orders if activated from the guard/reserves

11. ARE YOU NOW ON ACTIVE DUTY? (Do not check "Yes" if you are currently on drilling status in the the Selected Reserve, or if you are on active duty for training)

YES NO

12. ARE YOU NOW ON TERMINAL LEAVE JUST BEFORE DISCHARGE?

YES NO (Please provide a copy of your DD Form 214 (Member 4) when issued)

13. PLEASE COMPLETE THE FOLLOWING FOR EACH PERIOD OF MILITARY SERVICE

| A. DATE ENTERED | B. DATE SEPARATED | C. SERVICE COMPONENT (USN, USAF, USAR, ARNG, ETC.) | D. SERVICE STATUS (Active duty, drilling reservist, IRR, etc.) | E. WERE YOU INVOLUNTARILY CALLED TO ACTIVE DUTY FOR THIS PERIOD? |
|-----------------|-------------------|--|--|--|
| 9/26/2000 | 9/24/2004 | USMC (EXAMPLE) | ACTIVE DUTY | NO |
| 1/18/2005 | 8/14/2007 | USMCR | DRILLING | N/A |
| 8/15/2007 | Present | USMC | ACTIVE DUTY | YES |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

PART V - EDUCATION AND EMPLOYMENT INFORMATION

14A. DID YOU RECEIVE A HIGH SCHOOL DIPLOMA OR HIGH SCHOOL EQUIVALENCY CERTIFICATE? (If "Yes" provide date)

YES DATE: NO

14B. DO YOU HOLD ANY FAA FLIGHT CERTIFICATES? (If "Yes," specify each certificate in Part IX, Remarks)

YES NO

14C. EDUCATION AFTER HIGH SCHOOL (Including apprenticeship, on-the-job training, and flight training)

| NAME AND LOCATION OF COLLEGE OR OTHER TRAINING PROVIDER | DATES OF TRAINING | | NUMBER AND TYPE OF HOURS (Semester, Quarter, or Clock) | DEGREE, DIPLOMA, OR CERTIFICATE RECEIVED | MAJOR FIELD OR COURSE OF STUDY |
|---|-------------------|----|--|--|--------------------------------|
| | FROM | TO | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

14D. EMPLOYMENT (Only complete if you held a license or journeyman rating to practice a profession)

| EMPLOYMENT | PRINCIPAL OCCUPATION | NUMBERS OF MONTHS WORKED | LICENSE OR RATING |
|-------------------------|----------------------|--------------------------|-------------------|
| BEFORE MILITARY SERVICE | | | |
| AFTER MILITARY SERVICE | | | |

PART VI - ENTITLEMENT TO AND USAGE OF ADDITIONAL TYPES OF ASSISTANCE

| | |
|---|---|
| <p>15. DID YOU MAKE ADDITIONAL CONTRIBUTIONS (UP TO \$600.00) TO INCREASE THE AMOUNT OF YOUR MONTHLY BENEFITS? IF "YES," IT WILL HELP VA PROCESS YOUR CLAIM IF YOU SUBMIT ANY EVIDENCE YOU HAVE TO SUPPORT YOUR CLAIM (e.g., cash collection voucher, leave and earnings statement(s), receipt voucher, etc.)</p> | <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> |
| <p>16. DO YOU QUALIFY FOR A KICKER (sometimes called a "College Fund") BASED ON YOUR MILITARY SERVICE? (Kickers are additional amounts contributed by DOD to an education fund). If you qualify for a kicker, it will help VA process your claim if you submit a copy of the kicker contract. Reserve kicker contracts must include the amount and effective date.</p> | <p>ACTIVE DUTY KICKER <input type="checkbox"/> YES <input type="checkbox"/> NO RESERVE KICKER <input type="checkbox"/> YES <input type="checkbox"/> NO</p> |
| <p>17. IF YOU GRADUATED FROM A MILITARY SERVICE ACADEMY, SPECIFY THE YEAR YOU GRADUATED AND RECEIVED YOUR COMMISSION.</p> | <p>Graduation Year <input type="text"/></p> |
| <p>18. WERE YOU COMMISSIONED AS THE RESULT OF A SENIOR ROTC (Reserve Officers Training Corps) SCHOLARSHIP? If you received your commission through a non-scholarship program, check "No." If "Yes," provide the date of your commission and the amount of your scholarship for each school year you were in the Senior ROTC program. Don't report your monthly subsistence allowance (stipend).</p> <p>Scholarship Amounts:</p> <p>Year: <input type="text"/> Amount: <input type="text"/></p> | <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Date of Commission <input type="text"/></p> |
| <p>19. ARE YOU CURRENTLY PARTICIPATING IN A SENIOR ROTC SCHOLARSHIP PROGRAM THAT PAYS FOR YOUR TUITION, FEES, BOOKS AND SUPPLIES UNDER SECTION 2107 OF TITLE 10, U.S. CODE?</p> | <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> |
| <p>20. IF YOU HAD A PERIOD OF ACTIVE DUTY THAT THE DEPARTMENT OF DEFENSE COUNTS FOR PURPOSES OF REPAYING AN EDUCATION LOAN, CHECK "YES". SHOW THE PERIOD OF ACTIVE DUTY THAT THE MILITARY CONSIDERS AS BEING USED FOR THE PURPOSES OF REPAYING THIS EDUCATION LOAN IN PART IX "REMARKS".</p> | <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> |
| <p>21. FOR ACTIVE DUTY CLAIMANTS ONLY: ARE YOU RECEIVING, OR DO YOU ANTICIPATE RECEIVING, ANY MONEY (INCLUDING BUT NOT LIMITED TO FEDERAL TUITION ASSISTANCE) FROM THE ARMED FORCES OR PUBLIC HEALTH SERVICE FOR THE COURSE FOR WHICH YOU HAVE APPLIED TO THE VA FOR EDUCATION BENEFITS? IF YOU RECEIVE SUCH BENEFITS DURING ANY PART OF YOUR TRAINING, CHECK "YES." NOTE: IF YOU ARE ONLY APPLYING FOR TUITION ASSISTANCE TOP-UP, CHECK NO IN THIS ITEM.</p> | <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> |
| <p>22. FOR CIVILIAN EMPLOYEES OF THE U.S. GOVERNMENT ONLY: ARE YOU RECEIVING, OR DO YOU ANTICIPATE RECEIVING, ANY MONEY (INCLUDING, BUT NOT LIMITED TO, THE GOVERNMENT EMPLOYEES TRAINING ACT) FROM YOUR AGENCY FOR THE SAME PERIOD FOR WHICH YOU HAVE APPLIED TO THE VA FOR EDUCATION BENEFITS? IF YOU WILL RECEIVE SUCH BENEFITS DURING ANY PART OF YOUR TRAINING, CHECK "YES."</p> | <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> |

PART VII - INFORMATION ON VA EDUCATION BENEFITS

NOTE: The most current information on VA education benefits is available online at www.gibill.va.gov

If you would like to receive a printed pamphlet check here.

PART VIII - MARITAL AND DEPENDENCY STATUS

NOTE : Only complete this section if you have military service before January 1, 1977 (or delayed entry before January 2, 1978). See instructions.

23. ARE YOU MARRIED?

YES NO

24. DO YOU HAVE ANY CHILDREN WHO ARE UNDER AGE 18, OR OVER 18 BUT UNDER AGE 23, NOT MARRIED AND ATTENDING SCHOOL, OR OF ANY AGE PERMANENTLY HELPLESS FOR MENTAL OR PHYSICAL REASONS?

YES NO

25. DO YOU HAVE A PARENT WHO IS DEPENDENT UPON YOU FOR FINANCIAL SUPPORT?

YES NO

PART IX - REMARKS

(If more space is needed, please attach a separate sheet of paper. Be sure to include your name and social security number on each sheet)

APPLICATION SUBMISSION REMINDERS

Did you remember to

- Write your social security number on each page?
- Write your complete mailing address?
- Attach all supporting documents (e.g. voided check, orders, DD214, kicker contract, NOBE, cash collection voucher, etc.)?

IF SO, PLEASE SIGN AND DATE THE APPLICATION BELOW

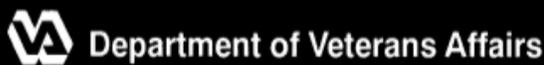
PART X - CERTIFICATION AND SIGNATURE OF APPLICANT

I CERTIFY THAT all statements in my application are true and correct to the best of my knowledge and belief. If on active duty, I also certify that I have consulted with an Education Service Officer (ESO) regarding my education program.

PENALTY - Willful false statements as to a material fact in a claim for education benefits is a punishable offense and may result in the forfeiture of these or other benefits and in criminal penalties.

26A. SIGNATURE OF APPLICANT (DO NOT PRINT)

26B. DATE SIGNED



APPLICATION FOR FAMILY MEMBER TO USE TRANSFERRED BENEFITS

INTERNET VERSION AVAILABLE - You may complete and send your application over the Internet at: www.gibill.va.gov

PART I - APPLICANT INFORMATION

| | | | | | | | | |
|---|--|--|---------------------------|--------------|----------------|--|--|--|
| 1. SOCIAL SECURITY NUMBER OF APPLICANT | 2. SEX OF APPLICANT <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE | 3. APPLICANT'S DATE OF BIRTH Month Day Year _____ | | | | | | |
| 4. NAME (First, Middle Initial, Last) | | | | | | | | |
| 5. APPLICANT'S ADDRESS Number and Street _____ Apt./Unit Number _____ City, State, ZIP Code _____ | | | | | | | | |
| 6A. APPLICANT'S TELEPHONE NUMBERS (Include Area Code) Primary: _____ Secondary: _____ | | | | | | | | |
| 6B. APPLICANT'S E-MAIL ADDRESS (If applicable) | | | | | | | | |
| 7. DIRECT DEPOSIT (Attach a voided personal check or provide the following information. See instructions for additional Direct Deposit information.) <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">Routing or Transit Number</td> <td style="text-align: center;">Account Type</td> <td style="text-align: center;">Account Number</td> </tr> <tr> <td style="text-align: center;"> <input type="text"/> </td> <td style="text-align: center;"> Checking <input type="checkbox"/> Savings <input type="checkbox"/> </td> <td style="text-align: center;"> <input type="text"/> </td> </tr> </table> | | | Routing or Transit Number | Account Type | Account Number | <input type="text"/> | Checking <input type="checkbox"/> Savings <input type="checkbox"/> | <input type="text"/> |
| Routing or Transit Number | Account Type | Account Number | | | | | | |
| <input type="text"/> | Checking <input type="checkbox"/> Savings <input type="checkbox"/> | <input type="text"/> | | | | | | |
| 8A. RELATIONSHIP TO SERVICE MEMBER <input type="checkbox"/> SPOUSE <input type="checkbox"/> CHILD | 8B. DID YOU RECEIVE A HIGH SCHOOL DIPLOMA OR HIGH SCHOOL EQUIVALENCY CERTIFICATE? (If "Yes," provide date) <input type="checkbox"/> YES DATE: _____ <input type="checkbox"/> NO | | | | | | | |

PART II - BENEFIT TRANSFERRED AND TYPE AND PROGRAM OF EDUCATION OR TRAINING

| | |
|---|---|
| 9A. BENEFIT TRANSFERRED TO YOU (Select one box) <input type="checkbox"/> CHAPTER 33 - POST-9/11 GI BILL <input type="checkbox"/> CHAPTER 30 - MONTGOMERY GI BILL EDUCATIONAL ASSISTANCE PROGRAM (MGIB) <input type="checkbox"/> CHAPTER 1606 - MONTGOMERY GI BILL-SELECTED RESERVE EDUCATIONAL ASSISTANCE PROGRAM (MGIB-SR) <input type="checkbox"/> CHAPTER 1607 - RESERVE EDUCATIONAL ASSISTANCE PROGRAM (REAP) | 9B. TYPE OF EDUCATION OR TRAINING (See instructions for additional information) <input type="checkbox"/> COLLEGE OR OTHER SCHOOL (Including on-line courses) <input type="checkbox"/> VOCATIONAL FLIGHT TRAINING <input type="checkbox"/> NATIONAL TEST REIMBURSEMENT (SAT, CLEP, ETC.) <input type="checkbox"/> LICENSING OR CERTIFICATION TEST REIMBURSEMENT (MCSE, CCNA, EMT, NCLEX, ETC.) <input type="checkbox"/> APPRENTICESHIP OR ON-THE-JOB <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> TUITION ASSISTANCE TOP-UP |
| 9C. PLEASE SPECIFY YOUR EDUCATIONAL OR CAREER OBJECTIVE, IF KNOWN (e.g. Bachelor of Arts in Accounting, welding certificate, police officer, etc.) | VA DATE STAMP (Do Not Write In This Space) |

PART III - EDUCATION AND EMPLOYMENT INFORMATION

10A. DO YOU HOLD ANY FAA FLIGHT CERTIFICATES? (If "Yes," specify below)

YES NO

10B. EDUCATION AFTER HIGH SCHOOL (Including apprenticeship, on-the-job training, and flight training)

| NAME AND LOCATION OF COLLEGE OR OTHER TRAINING PROVIDER | DATES OF TRAINING | | NUMBER AND TYPE OF HOURS (Semester, Quarter or Clock) | DEGREE, DIPLOMA, OR CERTIFICATE RECEIVED | MAJOR FIELD OR COURSE OF STUDY |
|---|-------------------|----|---|--|--------------------------------|
| | FROM | TO | | | |
| | | | | | |
| | | | | | |

10C. EMPLOYMENT (Only complete if you held a license or journeyman rating to practice a profession)

| EMPLOYMENT | PRINCIPAL OCCUPATION | NUMBER OF MONTHS WORKED | LICENSE OR RATING |
|-------------------------|----------------------|-------------------------|-------------------|
| JOB 1 SINCE HIGH SCHOOL | | | |
| JOB 2 SINCE HIGH SCHOOL | | | |

PART IV - ENTITLEMENT TO AND USAGE OF ADDITIONAL TYPES OF ASSISTANCE

11A. FOR APPLICANTS ON ACTIVE DUTY ONLY: Are you receiving or do you anticipate receiving any money (including but not limited to Federal Tuition Assistance) from the Armed Forces or Public Health Service for the course for which you have applied to the VA for education benefits?

YES NO

11B. FOR APPLICANTS WHO ARE CIVILIAN EMPLOYEES OF THE U.S. GOVERNMENT ONLY: Are you receiving or do you anticipate receiving any money (including but not limited to the Government Employees Training Act) from your Agency for the same period for which you have applied to the VA for education benefits? If you will receive such benefits during any part of your training, check "YES."

YES NO

PART V - SERVICE MEMBER INFORMATION

12. SERVICE MEMBER'S SOCIAL SECURITY NUMBER

13. SERVICE MEMBER'S BRANCH OF SERVICE

14. SERVICE MEMBER'S NAME (First, Middle Initial, Last)

15. SERVICE MEMBER'S ADDRESS

Number and Street _____

Apt./Unit Number _____

City, State, ZIP Code _____

PART VI - CERTIFICATION AND SIGNATURE OF APPLICANT

I CERTIFY THAT all statements in my application are true and correct to the best of my knowledge and belief. If on active duty, I also certify that I have consulted with an Education Service Officer (ESO) regarding my education program.

PENALTY - Willful false statements as to a material fact in a claim for education benefits is a punishable offense and may result in the forfeiture of these or other benefits and in criminal penalties.

16A. SIGNATURE OF APPLICANT (DO NOT PRINT)

16B. DATE SIGNED

19. NAME AND ADDRESS OF SCHOOL OR TRAINING FACILITY (Number and street or rural route, city or P.O., State and ZIP Code)

20. SPECIFY YOUR EDUCATION OR CAREER OBJECTIVE, IF KNOWN (e.g., Bachelor of Arts in Accounting, Welding Certificate, Police Officer)

21. DATE YOU WILL BEGIN SCHOOL OR TRAINING

MONTH DAY YEAR

**PART IV - DEA APPLICANT AND ELECTION INFORMATION
(Fry Scholarship Applicants, Skip to Part V)**

SECTION I - APPLICANT INFORMATION

22. IF YOU ARE THE SPOUSE OF A DISABLED VETERAN, IS A DIVORCE OR ANNULMENT PENDING?
 YES NO

23. ARE YOU A HANDICAPPED CHILD (14 YEARS OR OLDER), SPOUSE, OR SURVIVING SPOUSE SEEKING SPECIAL RESTORATIVE TRAINING?
 YES NO

24. ARE YOU A HANDICAPPED CHILD, SPOUSE, OR SURVIVING SPOUSE SEEKING SPECIALIZED VOCATIONAL TRAINING?
 YES NO

25. IF YOU ARE THE SURVIVING SPOUSE OF A DECEASED VETERAN, HAVE YOU REMARRIED SINCE HIS OR HER DEATH?
 YES NO (If "Yes," please provide date of remarriage) MONTH DAY YEAR

SECTION II - ELECTION (CHILD APPLICANTS ONLY)

IMPORTANT: You may not receive payments of Dependency and Indemnity Compensation (DIC) or Pension and you may not be claimed as a dependent in a compensation claim while receiving Survivors' and Dependents' Educational Assistance (DEA). CAREFULLY READ THE INSTRUCTIONS BEFORE COMPLETING THIS ELECTION BLOCK. YOU ARE STRONGLY ENCOURAGED TO DISCUSS YOUR ELECTION WITH A VA COUNSELOR.

26. I CERTIFY that I understand the effects of an election to receive DEA benefits and I elect to receive such benefits on the following date:
 MONTH DAY YEAR

PART V - APPLICATION HISTORY

27. PRIOR TO THIS APPLICATION, HAVE YOU EVER APPLIED FOR OR RECEIVED ANY OF THE FOLLOWING VA BENEFITS? (Check all appropriate boxes)

- A. DISABILITY COMPENSATION OR PENSION
- B. DEPENDENTS' INDEMNITY COMPENSATION (DIC)
- C. VOCATIONAL REHABILITATION BENEFITS (Chapter 31)
- D. VETERANS EDUCATION ASSISTANCE BASED ON YOUR OWN SERVICE SPECIFY BENEFIT(S): _____
- E. VETERANS EDUCATION ASSISTANCE BASED ON SOMEONE ELSE'S SERVICE
 SPECIFY BENEFIT(S) BY CHECKING APPLICABLE BOX BELOW AND COMPLETE ITEMS 28 AND 29
 - CHAPTER 35 - SURVIVORS' AND DEPENDENTS' EDUCATIONAL ASSISTANCE PROGRAM (DEA)
 - CHAPTER 33 - POST-9/11 GI BILL MARINE GUNNERY SERGEANT DAVID FRY SCHOLARSHIP
 - TRANSFERRED ENTITLEMENT
- F. NONE
- G. OTHER (Specify benefit(s)) _____

IMPORTANT: Complete Items 28 and 29 only if you checked block "E" in Item 27

28. NAME OF INDIVIDUAL ON WHOSE ACCOUNT YOU PREVIOUSLY CLAIMED BENEFITS (First, Middle, Last)

29. SOCIAL SECURITY NUMBER OF INDIVIDUAL ON WHOSE ACCOUNT YOU PREVIOUSLY CLAIMED BENEFITS

PART VI - APPLICANT'S MILITARY SERVICE INFORMATION

(Note: Chapter 35 benefits are not payable while an eligible person is on active duty)

30. HAVE YOU EVER SERVED ON ACTIVE DUTY IN THE ARMED FORCES? (If "No," skip to Part VII)
 YES NO

31. INFORMATION ABOUT YOUR PERIOD(S) OF ACTIVE DUTY

| A. DATE ENTERED ACTIVE DUTY | B. DATE SEPARATED FROM ACTIVE DUTY | C. BRANCH OF SERVICE OR RESERVE OR GUARD COMPONENT | D. CHARACTER OF DISCHARGE |
|-----------------------------|------------------------------------|--|---------------------------|
| | | | |
| | | | |
| | | | |

PART VII - EDUCATION, TRAINING, AND EMPLOYMENT

SECTION I - EDUCATION & TRAINING

32. CHECK THE APPROPRIATE BOX AND ENTER THE DATE IN ITEM 33

| | |
|--|---|
| <input type="checkbox"/> GRADUATED FROM HIGH SCHOOL | <input type="checkbox"/> DISCONTINUED HIGH SCHOOL |
| <input type="checkbox"/> EXPECT TO GRADUATE FROM HIGH SCHOOL | <input type="checkbox"/> AWARDED GED |
| <input type="checkbox"/> NEVER ATTENDED HIGH SCHOOL | |

33. DATE

| 34A. TYPE OF SCHOOL | 34B. NAME AND LOCATION OF SCHOOL <i>(City and State)</i> | 34C. DATES OF TRAINING | | 34D. NUMBER OF SEMESTER, QUARTER, OR CLOCK HOURS COMPLETED | 34E. DEGREE, DIPLOMA, OR CERTIFICATE RECEIVED | 34F. MAJOR FIELD OR COURSE OF STUDY |
|---------------------------|---|------------------------|----|--|---|-------------------------------------|
| | | FROM | TO | | | |
| HIGH SCHOOL | | | | | | |
| COLLEGE | | | | | | |
| VOCATIONAL OR TRADE | | | | | | |
| OTHER <i>(Specify)</i> | | | | | | |
| _____ | | | | | | |
| _____ | | | | | | |
| _____ | | | | | | |

SECTION II - EMPLOYMENT

35. CURRENT AND PAST EMPLOYMENT

| A. EMPLOYER | B. JOB TITLE | C. NUMBER OF MONTHS EMPLOYED | D. LICENSE OR RATING |
|-------------|--------------|------------------------------|----------------------|
| | | | |
| | | | |
| | | | |

NOTE: Complete Item 36 only if you are a civilian employee of the U.S. Government

| | |
|---|--|
| 36A. DO YOU EXPECT TO RECEIVE FUNDS FROM YOUR AGENCY OR DEPARTMENT FOR THE SAME COURSES FOR WHICH YOU EXPECT TO RECEIVE VA EDUCATIONAL ASSISTANCE? <i>(If "Yes," complete Item 36B)</i> | 36B. SOURCE OF EDUCATIONAL ASSISTANCE FROM GOVERNMENT EMPLOYMENT |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | |

PART VIII - REMARKS, REMINDERS AND VA EDUCATION BENEFITS PAMPHLET

SECTION I - REMARKS

37. REMARKS *(If more space is needed, please attach a separate sheet of paper. Be sure to include name and social security number on each sheet)*

SECTION II - REMINDERS

DID YOU REMEMBER TO:

- WRITE YOUR SOCIAL SECURITY NUMBER ON EACH PAGE
- WRITE YOUR COMPLETE MAILING ADDRESS
- ATTACH SUPPORTING DOCUMENTS *(e.g., birth certificate, marriage license, DD214, etc.)*

SECTION III - VA EDUCATION BENEFITS PAMPHLET

38. THE MOST CURRENT INFORMATION ON VA EDUCATION BENEFITS IS AVAILABLE ONLINE AT www.gibill.va.gov. IF YOU WOULD LIKE A COPY OF THE VA EDUCATION BENEFITS PAMPHLET PLEASE CHECK THE BOX.

PART IX - CERTIFICATION AND SIGNATURE OF APPLICANT

I CERTIFY THAT all statements in my application are true and correct to the best of my knowledge and belief.

| | |
|---|------------------|
| 39A. SIGNATURE OF APPLICANT <i>(DO NOT PRINT)</i> | 39B. DATE SIGNED |
| SIGN HERE IN INK | |

PENALTY: Willfully false statements as to a material fact in a claim for education benefits is a punishable offense and may result in the forfeiture of these or other benefits and in criminal penalties.

PART IV - BENEFIT AND TYPE OF EDUCATION OR TRAINING

21A. TYPE OF BENEFIT

- CHAPTER 33 - POST-9/11 GI BILL MARINE GUNNERY SERGEANT JOHN DAVID FRY SCHOLARSHIP (FRY SCHOLARSHIP)
- CHAPTER 35 - SURVIVORS' AND DEPENDENTS' EDUCATIONAL ASSISTANCE PROGRAM (DEA)

21B. TYPE OF TRAINING

- | | |
|--|---|
| <input type="checkbox"/> COLLEGE OR OTHER SCHOOL | <input type="checkbox"/> NATIONAL ADMISSION EXAMS OR NATIONAL EXAMS FOR CREDIT |
| <input type="checkbox"/> FARM COOPERATIVE | <input type="checkbox"/> CORRESPONDENCE COURSE <i>(DEA Children not eligible)</i> |
| <input type="checkbox"/> LICENSING OR CERTIFICATION TEST | <input type="checkbox"/> FLIGHT TRAINING <i>(Fry Scholarship only)</i> |
| <input type="checkbox"/> APPRENTICESHIP OR OTHER ON-THE-JOB TRAINING | |

22. SPECIFY YOUR EDUCATION OR CAREER OBJECTIVE (e.g., *Bachelor of Arts in Accounting, Welding Certificate, Police Officer*)

23. WHAT IS THE NAME OF THE PROGRAM YOU ARE REQUESTING TO PURSUE?

24. IF CHANGING SCHOOLS, PROVIDE NAME AND COMPLETE ADDRESS OF NEW SCHOOL OR TRAINING ESTABLISHMENT YOU PLAN TO ATTEND *(if applicable)*

25. IF CHANGING SCHOOLS, PROVIDE NAME AND COMPLETE ADDRESS OF CURRENT OR OLD SCHOOL OR TRAINING ESTABLISHMENT

26. TELL US **WHEN** AND **WHY** YOU STOPPED (or will stop) TRAINING AT YOUR OLD (or current) SCHOOL OR TRAINING ESTABLISHMENT

PART V - REMARKS AND CERTIFICATION

27. REMARKS *(If more space is needed, please attach a separate sheet of paper. Be sure to include name and social security number on each sheet of paper)*

I CERTIFY THAT all statements in my application are true and correct to the best of my knowledge and belief.

PENALTY - Willful false statements as to a material fact in a claim for education benefits is a punishable offense and may result in the forfeiture of these or other benefits and in criminal penalties.

28A. SIGNATURE OF APPLICANT *(DO NOT PRINT)*

28B. DATE SIGNED

**Sign Here
In INK**

TERMS/ DEFINITIONS

VA DEFINITION OF TERMS

The definitions given below are for terms commonly used in the administration of benefits under chapter 30, 32, and 35, title 38, U.S. Code; chapter 106, title 10, U.S. Code and sections 901 and 903 of Public Law 96-342. Some definitions are from title 38 U.S. Code and 38 CFR (Code of Federal Regulations). At times, it will be necessary to refer to title 38 or the CFR for the complete legal definition.

ACCRUED BENEFITS Benefits payable to next of kin or other eligible beneficiaries of a deceased claimant; payments represent amounts due but unpaid at time of death. (See pt. IV, ch. 11, for procedures)

ACDUTRA (ACTIVE DUTY FOR TRAINING) Active duty for training in the Reserves or National Guard. This includes reservists on full-time duty for training purposes in the Armed Forces, or members of the National Guard or Air National Guard of any state, performing full-time training duty under 32 U.S.C. 316, 502, 503, 504, or 505. (See 38 U.S.C. 101 (22) for full definition).

ACCREDITING AGENCY A nationally recognized agency or association that the Secretary of Education determines as a reliable authority on the quality of training offered by an educational institution. The Secretary publishes a list of these agencies and associations which State approving agencies use for establishing what courses may be approved under the provisions of 38u.s.c. 3675.

ACTIVE DUTY Full-time duty in the Armed Forces of the United States. This also includes full-time duty performed by commissioned officers of the Public Health Service and the National Oceanic and Atmospheric Administration. (See 38 U.S.C. 101(21) for a full definition. For the definitions specific to certain benefits, see pt. V, figs. 1.01, 1.02, 1.06, and 1.07, for chapter 30; pt. VI, par. 1.02a, for chapter 32; and pt. VII, par. 1.02f, for chapter 35.)

ADS (ACTIVE DUTY SUPPORT) Reserve components whose members serve full-time in operational or support positions but are never formally called to active duty. (See pt. VIII, par. 1.03e; see also M21-I, pt. IV, pars. 10.02 and 10.03.)

ADVANCE PAYMENT The monetary allowance which may be payable to a trainee for the first fractional (or full) month and the following full month of enrollment. These payments are mailed to schools before the beginning of classes for release to trainees who have completed registration. (See pt. IV, par. 10.02a)

AFFIRMATION OF ENROLLMENT The document (DVA Form 22-1999c) signed by the veteran or eligible person affirming an enrollment contract for a correspondence course. The date of affirmation must be 10 days after the veteran or eligible person has signed the enrollment contract. (See pt. IV, par. 2.15.)

AGR (ACTIVE GUARD RESERVE) A member of the Army Reserve, Air Force Reserve, Army National Guard or Air Force National Guard who is on active duty for purposes other than training. The Marine Corps Reserve equivalent is called *FTS* (Full-Tune Service). (See pt. VIII, par. 1.03e; see also M21-I, pt. IV, pars. 10.02 and 10.03.)

APPRENTICESHIP TRAINING On-the-job training which has been established as an apprentice course by a training establishment, including a course under the supervision of a college or university, any state department of education, state apprenticeship agency, state board of vocational education, joint apprenticeship committee, or the Bureau of Apprenticeship and Training and which has been approved as an apprentice course by the State approving agency (SAA).

ARMED FORCES This means the United States Army, Navy, Marine Corps, Air Force, and Coast Guard, including the reserve components thereof. (See 38 CFR 21.3021 (e) for full definition.)

ASSIGNMENT OF BENEFIT Any arrangement by a school that denies the trainee the opportunity to control the proceeds of a check. Section 5301(a) of title 38, U.S. Code, provides that payments of benefits due under the laws administered by DVA shall not be assigned except as specifically authorized by law. There are no laws that authorize assignment of DVA educational checks.

ATTENDANCE The presence of a veteran or eligible person in the class where the approved course is being taught, at a training establishment; or any other place of instruction, training, or study designated by the educational institution or training establishment where the veteran or eligible person is enrolled and is pursuing a program of education. (See 38 CFR 21.4200(q).)

AUDITED COURSE (See pt. IV, par. 11.06.)

BASIC EDUCATIONAL ASSISTANCE A monetary benefit payable to all individuals who meet the basic requirements of chapter 30, title 38, U.S. Code, for pursuit of a program of education. (See 38 CFR 21.7020(b)(4).)

BDC (BENEFITS DELIVERY CENTER) The location where DVA's mainframe computer processing takes center. The two main centers for benefit processing are at Hines, Illinois and Philadelphia, Pennsylvania

BDN (BENEFITS DELIVERY NETWORK) (See *TARGET*.)

BIRLS (BENEFICIARY IDENTIFICATION AND RECORDS LOCATOR SUBSYSTEM) This is a computerized record system directly accessed regional offices by means of computer terminals. It contains basic identifying information on a DVA claimant including current location of the claimant's folder and service information.

BREAK IN SERVICE (This term has a special meaning under chapter 30. See part V, fig. 1.06c.)

CALENDAR MONTH A complete month, for example, the month of June, as opposed to a 30-day period. The most common application of "calendar month" is to the interDVAI between school terms, regarding entitlement to payment for an interval. (See pt. IV, par. 8.01c.)

C/E (CERTIFICATE OF ELIGIBILITY) A DVA Form 22-1993a issued to an applicant showing approval to pursue a stated program of education at a particular institution, the remaining entitlement of the trainee, and the ending date of the trainee's eligibility. A DVA Form 22-0557 is a computer generated C/E for chapter 30 only. (See pt. III, par. 9.01, and pt V, par. 2.09.)

CERTIFYING OFFICIAL The person at an education institution who has been delegated authority to sign enrollment certifications, other certification documents, and reports relating to VA benefits.

CHANGE OF PROGRAM A change in the educational, professional, or vocational objective for which the claimant entered training. (See 38 CFR 21.4234(a) and pt. IV, ch. 4.)

CHARACTER OF DISCHARGE A service department's characterization of a particular period of service. (For the effect on chapter 30, see pt. V, par. 1.07d; for the other benefits, see pt. III, par. 3.09.)

CLAIMANT An individual who has filed a claim for DVA benefits. This term is used at any stage in the process of resolving the claim. It includes persons who are potentially

eligible for benefits, recipients of benefits, and those whose claims have been disallowed.

COD (CERTIFICATION OF DELIVERY OF ADVANCE PAYMENT AND ENROLLMENT) A DVA Form 22-1999V containing preprinted information furnished to schools in a separate envelope when an adDVance payment check is issued for one of their trainees. This form must be completed by the certifying official and immediately returned to DVA when the advance payment check is given to the trainee. (See pt. IV, par. 10.15.)

COV (CONVENIENCE OF GOVERNMENT) A reason for separation from active duty, which allows discharge before completion of the obligated period of service; a factor in determining eligibility under chapter 30 and 32. (See pt. V, par. 1.07d (4), for ch. 30; see pt. VI, par. 3.05b(4), for ch. 32.)

CONCURRENT ENROLLMENT Enrollment at more than one school at the same time (the dates of course pursuit at each school may overlap). When a trainee cannot successfully schedule his or her complete program at one school, or cannot complete his or her program within the planned period to complete an objective, a trainee may pursue courses at a second institution. The primary institution certifies that supplemental school pursuit will be accepted at full credit toward the trainee's course objective. (See pt. IV, par. 1.09b.)

CONFIRMED ENROLLMENT An enrollment certification that is dated and signed by the school's certifying official on or after the first day of a certified enrollment period. (See pt. IV, par. 1.27.)

CONTINUOUS ACTIVE DUTY (This term has a specific meaning under chapter 30. See part V, chapter 1.07b.)

COOPERATIVE PROGRAM A full-time program consisting of alternating phases of school instruction and training in a business or industrial establishment that is strictly supplemental to the school instruction. Alternating periods may be a part-day in school and a part-day on the job or may be periods which alternate on a daily, weekly, monthly, or term basis. The alternate in-school periods of the course must be at least as long as the alternate periods in the business or industrial establishment to be approved for DVA benefit payments. (See pt. IV, par. 7.08.)

CORRESPONDENCE TRAINING Training completed by mail. Lessons are sent to the trainee to be completed at home. Completed lessons are mailed to the school for grading. (See pt. IV, ch. 2.)

COST OF COURSE The total cost for tuition and fees for a course that an educational institution charges to non-veterans whose circumstances are similar to veterans enrolled in the same course. "Cost of course" does not include the cost of supplies or books, which the trainee is required to purchase at his or her expense.

COURSE An individual unit course within an education program or an approved course of study.

DD FORM 214 The Certificate of Release or Discharge from Active Duty which is prepared at the time an individual completes a period of active duty in the Armed Forces. Former members of the Public Health Service and the National Oceanic and Atmospheric Administration do not receive a DD Form 214. Veterans of these branches of service receive comparable documents, which provide necessary information concerning their active duty service. (See pt. V, par. 3.03c, for chapter 30; for other benefits, see pt. III, par. 3.07.)

DEA (DEPENDENTS' EDUCATIONAL ASSISTANCE) PROGRAM - CHAPTER 35 OF TITLE 38, U.S. CODE (See Survivors' and Dependents' Educational Assistance.)

DEFECTIVE ENLISTMENT An agreement for enlistment into military service which is voided for one of the following reasons: (1) the individual enlisted was a minor for purposes of service in the

Armed Forces; (2) the enlistment or induction was erroneous; or (3) the enlistment agreement was defective. A defective enlistment is a factor in chapter 30 eligibility determinations. (See pt. V, par. 1.07a)

DEFICIENCY COURSE Any secondary level course or subject not previously completed satisfactorily but is specifically required for pursuit of a post-secondary program of education. (See 38 CFR 21.4200(s) and pt. III, par. 7.16.)

DELIMITING DATE The first day after a claimant's period of eligibility expires. Benefits are not payable on or after the delimiting date.

DEP (DELAYED ENLISTMENT PROGRAM) A form of delayed entry that allows individuals to contract to go on active duty in the Armed Forces at a later date. The periods of time of the delayed entry onto active duty vary according to the specific program involved. For example, under DEP, the delayed entry onto active duty varies up to 270 days. In other programs, such as Reserve Officers' Training Corps (ROTC), the delay may be several years.

DEPENDENT Qualifying dependents for DVA benefits purposes are a veteran's spouse and child (natural child, adopted child, or stepchild). A veteran's mother or father may also be considered a dependent if dependent upon the veteran for support. (See pt IV; ch. 9.)

DISABLING EFFECTS OF CHRONIC ALCOHOLISM Alcohol-induced physical or mental disorders or both, such as habitual intoxication, withdrawal, delirium, amnesia, dementia, and other like manifestations of chronic alcoholism which have been medically diagnosed as manifestations of alcohol dependency or chronic alcohol abuse, and are determined to have prevented commencement or completion of the affected individual's chosen program of education. (See pt. III, par. 4.03.)

DISCHARGE (OR RELEASE) Dismissal or release from a period of service. (See 38 U.S.C. 101(18) for special circumstances which may be considered a discharge. See pt. III, ch. 3, for additional information for general claims processing and pt. V, ch. I, for additional information for chapter 30 processing.)

DLC (DATE OF LAST CERTIFICATION) The last date through which an eligible person's training has been verified. The DLC field on Target shows the day following the actual date of last certification. For example, the veteran's training has been verified through June 30; DLC on Target will show July 1.

DLP (DATE OF LAST PAYMENT) The last date through which payment has been issued based on a trainee's enrollment. The DLP field on Target shows the day following the actual date of first payment. For example, the veteran has been paid through April 30; DLP on Target will show May 1.

DMDC (DEFENSE MANPOWER DATA CENTER) RECORD The DMDC record contains information from the serviceperson's military records. DVA accesses the DOD's (Department of Defense's) manpower database through computer interface between DMDC in Monterey, CA, and the Target system. This data is used for chapters 30 and 106 only.

DROP PERIOD (See part IV, par. 11.06.)

DROPPED PRIORS Award lines covering dates earlier than the current award period which have been dropped from the primary award screen due to lack of storage space. (See pt. IV, par. 13.19.)

DUAL ELIGIBILITY Entitlement to education benefits fewer than two or more programs administered by DVA. If an individual qualifies for educational assistance under two or more such programs, the total assistance available may not exceed an aggregate total of 48 months, or the

equivalent in part-time benefits. A person having dual eligibility may not receive more than one benefit at a time. (See pt. IV, par. 3.01.)

DUPLICATION OF BENEFITS Concurrent payment of education benefits under more than one DVA program and concurrent payment of DVA education benefits and payment under certain other federal benefit programs. (See pt. IV, ch. 3, for full information.)

EARLY-OUT DISCHARGE A discharge before the completion of the obligated period of service; a factor in eligibility for chapters 30 and 32. (See pt. V, par. 9.03b(3), for chapter 30; pt. VI, par. 1.04, for chapter 32.)

EDUCATIONAL ASSISTANCE The monetary benefits received by a veteran or eligible person. This term is generally used interchangeably with the term "education benefits." However, under the Montgomery GI Bill -Active Duty, the term "educational assistance" means basic educational assistance, supplemental educational assistance, and all additional amounts payable, commonly called "kickers."

EDUCATIONAL INSTITUTION Any public or private elementary school, secondary school, vocational school, correspondence school, business school, junior college, teachers' college, college, normal school, professional school, university, or scientific or technical institution, or other institution furnishing education for adults. It also includes training establishments. (See definition of training establishment below. (See also 38 CFR 21.4200(a)(1).) Chapter 35 has a similar definition except that education furnished must be at least the secondary school level or above; includes institution which provide specialized vocational courses for the mentally or physically handicapped generally recognized as on the secondary school level or above. Training establishments are also included. (See also 38 CFR 21.4200(a)(2).)

ELR (EDUCATION LIAISON REPRESENTATIVE) The person at the DVA regional office responsible for the education liaison and program approval functions. The ELR is responsible for promptly informing State approving agencies, schools, and training establishments of changes in policies and procedures.

ENROLLMENT That state of being on the rolls or file of a school that contains the names of active trainees (See 38 CFR 21.4200(n).)

ENROLLMENT PERIOD An interval of time during which a veteran or eligible person is enrolled in an educational institution in pursuit of a program of education. (See pt. IV, par. 1.10.)

ENTITLEMENT The number of months the trainee is eligible for DVA education benefits. This is usually expressed in the numbers of months and days the trainee will be eligible for fulltime benefits, or the equivalent in part-time training, but also may be expressed in a dollar amount. Entitlement may vary depending on the education program the individual qualifies under. In no event will entitlement exceed 48 months under any combination of laws.

EQUIVALENT CLOCK HOURS Clock hours arrived at when a trainee takes any course creditable toward a standard college degree. DVA will determine the equivalent clock hours if a semester or quarter-hour course overlaps with a primary course-measured on a clock-hour basis. Using a formula, the credit hours are converted into equivalent clock hours. DVA treats equivalent clock hours as clock hours for measurement purposes. (See pt. IV, pars. 6.05.)

EQUIVALENT CREDIT HOURS Credit hours arrived at when a term is not a standard semester or quarter. DVA will determine the equivalent for full-time undergraduate training. Using a formula, the result is called equivalent credit hours. DVA treats equivalent credit hours as credit hours for measurement purposes. (See pt. IV, pars. 6.05.)

ESO (EDUCATION SERVICES OFFICER or-EDUCATION OFFICER) A person assigned the responsibility for advising servicepersons of the educational opportunities available to active duty personnel. This includes civilian education services officers, military career counselors, and other employees of military education offices. (See pt. 111, par. 3.06.)

ESTABLISHED CHARGE The lesser. Of the charge for a correspondence course or courses determined on the basis of the lowest extended time payment plan offered by the educational institution and approved by the appropriate SAA, or the actual cost to the veteran or eligible person.

ETS (EXPIRATION OF TERM OF SERVICE) A separation reason shown on DD Form 214. (For chapter 30 eligibility determinations, ETS is considered to be a type of COG discharge. (See pt. V, par. 3.06e (6).)

FACILITY CODE The numeric code assigned by VA to an institution specifically identifying it or one of its subdivisions.

FLIGHT TRAINING Training provided by an FAA (Federal Aviation Administration) approved school that leads to a vocational objective in the field of aviation or a standard college degree. (See pt. IV, ch. 2.)

GED (GENERAL EDUCATIONAL DEVELOPMENT) CERTIFICATE A certificate issued by a state-level department of education that is acceptable as the equivalent of a high school diploma. In addition, a DOD certificate of GED equivalency is acceptable evidence of completion of high school educational requirements.

GRADUATE RESIDENT TRAINING Graduate resident training is a course which is offered through regularly scheduled, conventional classroom or laboratory sessions, or consists of research necessary for the preparation of the trainee's master's thesis, doctoral dissertation, or a similar treatise which is a prerequisite to the degree being pursued. (See 38 CFR 21.4280(e).)

IADT (INITIAL ACTIVE DUTY FOR TRAINING) A military term referring to the period, generally 6 months in length of training for active duty; a factor for eligibility under chapter 106. LADT is required for people entering Selected Reserve. (See pt. VITI, par. 1.03.)

IHL (INTSTITUTION OF HIGHER LEARNING) A college, university, technical, or business school offering postsecondary-level academic instruction that leads to an associate degree or higher degree if the school is empowered by the appropriate state education authority under state law to grant an associate degree or higher degree. (Foreign schools are considered IHL's if recognized as institutions of higher learning by the secretary of education, or comparable official, of the country where the school is located.) This designation also includes hospitals offering medical-dental internships or residencies without regard to whether the hospital grants a post-secondary degree. (See 38 CFR 21.4200(h)).

INDEPENDENT STUDY A course or subject leading to a standard college degree and consisting of a prescribed program of study with provision for interaction either by mail, telephone, or personally between the trainee and the regularly employed faculty of the university or college and is offered without any regularly scheduled, conventional classroom or laboratory sessions. (See 38 CFR 21.4280© and pt. IV, par.6.07.)

INTERDVAL PAYMENT Educational assistance benefits paid during the interDVALs between terms at a school or between terms when transferring from one school to another while remaining in the same program. Persons on active duty or training at the less than one-halftime rate in the preceding term are not entitled to interval payments (See pt. IV, ch. 8.)

KICKERS Amounts contributed by DOD to an education fund on behalf of participants to encourage enlistment of retention in the Armed Forces. These amounts are added to any other education benefits to

which the person may be entitled. Generally, the kickers are applicable only to chapters 30 and 32 and to section 903.)

MATRICULATED TRAINEE A college or university trainee who has satisfied all prerequisites for formal admission and recognition by the institution as a degree-seeking trainee. This does not mean that an undergraduate trainee must have formally been accepted into a specific major curricular field of study before he or she may be classified as "matriculated." (See pt.IV, pars. 1.28-1.34, for procedures.)

MGIB (MONTGOMERY GI BILL) Refers to either the Montgomery GI Bill -Active Duty (chapter 30 of title 38, U.S. Code) or the Montgomery GI Bill – Selected Reserve (chapter 106 of title 10, U.S. Code).

MITIGATING CIRCUMSTANCES (See part JV, par. 11.07.)

NCD (NON-COLLEGE DEGREE) The designation "NCD" is used to refer to a course or program of education of vocational training that does not lead to a standard college degree.

NOBE (NOTICE OF BASIC ELIGIBILITY) A DD Form 2384, Selected Reserve Educational Assistance Program Notice of Basic Eligibility, which the Selected Reserve member obtains from his or her National Guard or reserve component verifying his or her eligibility to the Montgomery GI Bill -Selected Reserve. If available, this form should accompany the reservist's application for benefits. (See pt. VIII, par. 3.04.)

NOE (NOTICE OF EXCEPTION) System-generated messages that indicate such things as new information from DOD, award input errors, returned checks, or delinquent certifications.(See pt. II, ch. 8; pt.V, ch. 5; pt. VI, ch. 5; and pt. VITI, ch. 5.)

NONMATRICULATED TRAINEE A trainee who is enrolled in courses at an IHL, who either has not completed all prerequisites for admission into a degree program or does not choose to attain recognition as a degree-seeking trainee.(See pt.IV, pars. 1.28-1.34.)

NONPUNITIVE GRADE (See part IV, par. 11.06.)

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NONSTANDARD TERM A term in which is of a shorter or longer length (e.g., weeks and days) than a standard quarter or semester. (See *QUARTER SEMESTER*.)

NORMAL COMMUTING DISTANCE Two locations within 55 miles of each other. A branch, extension, or additional facility of a school located more than 55 miles from the school's main campus or parent facility may be considered within normal commuting distance only if school records show that, before the establishment of the additional teaching site, at least 20 trainees (or 5% of the enrollment, whichever is less) on the main campus or parent facility were regularly commuting from the area where the additional teaching site is located; or other comparable evidence clearly shows that trainees commute regularly between the two locations. (See 38 CFR 21.4200(m)).

OBJECTIVE The final educational, professional, or vocational goal of a veteran, serviceperson, or eligible person (e.g., degree, diploma, certificate, occupation). (See pt. ID, par.6.04.)

OJI (ON-THE-JOB TRAINING) Training given while on the job by an employer who agrees to retain the trainee in employment; considered a program of education for DVA benefit purposes.

OLAF (ON LINE APPROVAL FILE) Automated record of school approval information.(See pt. III, par. 6.05.)

OPEN WINDOW PERIOD (See part V, par. 1.02h.)

PERSIAN GULF WAR The period beginning on August 2, 1990 and ending on the date to be prescribed by Presidential proclamation or by law. The term includes Somalia, Rwanda and similar

humanitarian/police actions.(See 38 U.S.C. 101(33).)

PRIMARY INSTITUTION The institution that will confer or grant the current degree sought, or certify that the trainee has completed the program qualifying him or her for the current objective sought. (See pt. IV, par. 1.09.)

PRIOR CREDIT Credit previously earned and transferred which is creditable to the particular degree or other educational objective being pursued by the veterans or eligible person.(See pt. IV, par. 1.15.)

PROGRAM OF EDUCATION A combination of subjects, unit courses, or training activities pursued at a school or training establishment which is generally accepted as necessary to meet requirements for a predetermined educational, professional, or vocational objective (e.g., diploma, degree, certificate, occupation). (See pt. ID, par.6.02.)

PUNITIVE GRADE (See part IV, par.11.06.)

PURSUIT OF A PROGRAM OF EDUCATION To work, while enrolled, toward the objective of a program of education. This work must be in accordance with approved institution policy and regulations and applicable criteria of 38 U.S.C.; must be necessary to reach the program's objective; and must be accomplished through courses as shown in 38 CFR 21.4200(b)(3) .)

QUARTER A division of the ordinary school year, usually a period from 10 to 13 weeks long. (See 38 CFR 21.4200(b) (3)).

REFRESHER TRAINING Training in a course at the elementary or secondary level to review or update material previously covered in a course that has been satisfactorily completed. Under some education programs, the term also means training in a program of education in which the veteran is already qualified, provided that the program pursued is training to permit the veteran to update knowledge and skills and to be instructed in the technological advances which have occurred in the veteran's field of employment during the veteran's period of service. It may be used to update skills learned either during or before service but not for skills first acquired after discharge from service. Veterans pursuing "refresher training" are not limited to "refresher courses" at the elementary or secondary level. (See pt. III, pars. 7.17 and 7.18.)

REMEDIAL COURSE A course designed to overcome a deficiency at the elementary or secondary level in a particular area of study, or a handicap, such as in speech. (See 38 CFR 21.4200(t); and pt. ID, par. 7.16.)

REPORTING FEE A fee paid annually to each educational institution furnishing training under the various DVA education programs for required reports or certifications. This fee is intended to help defray the costs of processing various reports and certifications required to be submitted to DVA and are in lieu of any other compensation or reimbursement.

REPS (RESTORED ENTITLEMENT PROGRAM FOR SURVIVORS) A benefit that restores certain Social Security benefits that were reduced or terminated by the Omnibus Budget Reconciliation Act of 1981, Public Law 97-35. Certain survivors of deceased veterans who died of service-connected causes incurred or aggravated before August 13, 1981, are eligible for benefits. (See pt. IV, pars. 6.07a (4), 6.11b.)

RESEARCH IN ABSENTIA Research activity necessary for the preparation of the trainee's master's thesis, doctoral dissertation, or a similar thesis which is a prerequisite to the degree being pursued and is pursued outside a normal classroom setting. (See pt. IV, pars. 6.07a (4), 6.11b.)

RESERVIST A member of the Selected Reserve who is eligible for educational assistance under 10 U.S.C., chapter 106. (See 38 CFR 21.7520(a) (l).) Also, a member of a military reserve component.

SAA (STATE APPROVING AGENCY) An agency appointed by the Chief Executive of a state to approve programs of education and training for payment of benefits under the various education program laws administered by DVA

SCS (STANDARD CLASS SESSION) The time an educational institution schedules for class each week in a regular quarter or semester for one quarter or one semester hour of credit. A standard class session is not less than 1 hour (or 50-minute period) of academic instruction, 2 hours (or two 50-minute periods) of laboratory instruction, or 3 hours (three 50-minute periods or 150 minutes) of workshop training. (See 38 CFR 21.4200(g)).

SCHOOL LIABILITY Liability assessed against a school because an overpayment was credited against a veterans or eligible person as a result of the willful or negligent failure of the school to report to DVA, the discontinuance or interruption of a course, or the willful or negligent false certification by an educational institution. (See pt. I, ch. 7.)

SCHOOL YEAR Generally, a period of 2 semesters or 3 quarters, which is not less than 30 or more than 39 weeks in total length. (See 38 CFR 21.4200(b) (l).)

SELECTED RESERVE The Selected Reserve of the Ready Reserve of any of the reserve components of the Armed Forces of the United States, including the Army Reserve, National Guard Reserve, Air Force Reserve, Marine Corps Reserve; Army National Guard and Air National Guard, and the Coast Guard Reserve. (See pt. VII, par. 1.01.)

SEMESTER A division of the ordinary school year, usually a period from 15 to 19 weeks long. (See 38 CFR 21.4200(b)(4) .)

SERVICEPERSON An individual who is currently serving on active duty. Same as "service member."

SPECIAL PAYMENT Expedited payments made when a delay in issuing payment has caused financial hardship for a trainee. (See pt. IV, ch. 10, pars. 10.18-10.20.)

STANDARD COLLEGE DEGREE An associate or higher degree awarded by an institution of higher learning that is accredited as a collegiate institution by a recognized regional or national accrediting agency or an IHL that is a candidate for accreditation, or an institution which is accredited by an agency recognized to accredit specialized degree-level programs. (See 38 CFR 21.4200(e).)

SUMMER SESSION A division of the summer term specifically designated in a school catalog as a distinct period of instruction. These sessions vary in length, and are often only 3 to 8 weeks long. (See 38 CFR 21.4200(b) (6)).

SUMMER TERM The whole of the period of instruction at a school which takes place between ordinary school years. A summer term may be divided into several sessions. (See 38 CFR 21.1200(b) (5)).

SUPPLEMENTAL EDUCATIONAL ASSISTANCE A benefit payable to a veteran or serviceperson as a supplement to his or her basic educational assistance for pursuit of a program of education under 38 U.S.C., chapter 30. (See pt. V, par. 1.12.)

SURVIVORS' AND DEPENDENTS' EDUCATIONAL ASSISTANCE- CHAPTER 35 OF TITLE 38,

U.S. CODE The benefits payable to eligible dependents and survivor of veterans. It is often abbreviated simply as DEA (Dependents' Educational Assistance).

TARGET DVA's main processing system for all awards and related actions. This system generates the payment information that is sent to the Treasury for producing the benefit checks. The Target System also contains the master record files for veterans and other beneficiaries.

TRAINING ESTABLISHMENT Any establishment providing apprenticed or other training on-the-job, including those under the supervision of a college or university or any state department of education, or any state apprenticeship agency, or any state board of vocational education, or any joint apprenticeship committee, or the Bureau of Apprenticeship and Training established in accordance with 29 U.S.C., chapter 4C, or any agency of the federal government authorized to supervise such training. (See 38 CFR 21.4200(c).)

TRAINING TIME Training time is full-time training or less that is determined by the number of credit or clock hours a trainee takes. The training time determines the monthly rate of payment. (See pt. IV, chs 6 and 7.)

TUTORIAL ASSISTANCE An allowance paid to eligible persons to supplement their monthly educational assistance. Tutorial assistance may be paid to eligible persons to aid them in defraying the expenses incurred by their need for tutoring.

TWO-YEAR RULE Restriction against enrollment of an individual in a course as a DVA beneficiary if the course has been in operation for less than 2 years. (See 38 CFR 21.4251 for additional information, including provisions for waiver of this rule.)

UNDERGRADUATE COLLEGE DEGREE A college or university degree obtained through the pursuit of unit subjects that are below the graduate level. Included are associate degrees, bachelor's degrees and first professional degrees. (See 38 CFR 21.4200(f).)

DVADS (VETERANS EDUCATIONAL ASSISTANCE PROGRAM) A letter-generating system that contains selected DD Form 214 information of discharged veterans. The information for the DVADS record comes from the DD Form 214 and is entered into the system at the Austin DPC. (For DVADS Indicator, see pt. III, pars. 3.07b, 3.16.)

DVAI (VETERANS ASSISTANCE INQUIRY) An inquiry regarding questioned amounts of DVA monetary benefits, or the non-receipt of such benefits after the anticipated claims processing time has elapsed.

VEAP (VETERANS' EDUCATIONAL ASSISTANCE PROGRAM) A contributory educational assistance program for Post-Vietnam Era veterans provided for under chapter 32 of title 38, U.S. Cod. (See pt. VI, ch. 1.)

VETERAN A person who served in the active military, naval, or air service. The definition in 38 U.S.C. 1.01(2) requires the person to be discharged or released from service under conditions other than dishonorable. There are different definitions for the term "veteran" throughout the regulations. For example, a veteran under chapter 32 of 38 U.S.C. is an individual who meets the service requirements for a veteran as defined in the 38 CFR 21.5040; and a veteran under chapter 30 of 38 U.S.C. is an individual who meets the service requirements for a veteran under 38 CFR 21.7042.)

