Student Financial **Aid**

A Department of Central Piedmont Community College

Request for Veterans' Information

Name: _____ **Student ID #:** _____

(Please Print)

If you are receiving or will receive any Veterans' Educational benefits, please forward a copy of your VA award letter. If your award letter is not available, please complete the information below.

Please complete the appropriate section(s):

☐ **I will receive the Montgomery GI Bill Benefits (Chapter 30).**
Amount per Month: $_____ Number of Months: _____

☐ **I will receive Vocational Rehabilitation Benefits (Chapter 31).**
Amount per Month: $_____ Number of Months: _____

☐ **I will receive Post-Vietnam Era VEAP Benefits (Chapter 32).**
Amount per Month: $_____ Number of Months: _____

☐ **I will receive the Post-9/11 GI Bill Educational Benefits (Chapter 33).**
Amount per Month: $ _____ Number of Months: _____

☐ **I will receive the Fry Scholarship (Chapter 33).**
Amount per Month: $_____ Number of Months: _____

☐ **I will receive the Transfer of Entitlement Educational Benefits (Chapter 33).**
Amount per Month: $ _____ Number of Months: _____

☐ **I will receive Veterans' Dependents Educational Assistance Benefits (Chapter 35).**
Amount per Month: $_____ Number of Months: _____

☐ **I will receive Selective Service Reserve Pay (Montgomery GI Bill – Chapter 1606).**
Amount per Month: $_____ Number of Months: _____

☐ **I will receive New Education Benefit for Activated Reservists (Chapter 1607).**
Amount per Month: $_____ Number of Months: _____

☐ **I will receive the New VRAP Veterans Retraining Assistance Program Benefits.**
Amount per Month: $_____ Number of Months: _____

☐ **I will not receive my veterans' benefits.**

Comments:

I certify that all of the information on this form is complete and correct and that I must contact the Financial Aid/VA Office if there are any changes.

Student Signature: _____ **Date:** _____

Warning: According to the U.S. Department of Education, if you purposely give false or misleading information on form, you may be subject to a fine of up to $20,000 or imprisonment for up to 5 years, or both.

Financial Aid/Veteran's Affairs – Central Piedmont Community College – PO Box 35009 – Charlotte, NC 28235-5009
Telephone: (704) 330-6942 Fax: (704) 330-5053

You may submit, fax or mail your documents to any of our six locations.

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