## SRJC Veterans Affairs Certification Request

This form must be submitted each semester you wish to use your VA educational benefits. Any time you make a change to your schedule, you must submit a new form. VA <u>will not</u> pay for courses that are not required to complete your program of study. VA <u>will not</u> pay for repeat coursework unless a higher minimum grade is required.			
		SID	
Phone	Email	SSN	
Benefit Chapter: 30 🗌 💠	31 🗆 33 🗆 1606 🗆 35 🗆 I	f 35, VA File Number	
Have you completed your	FAFSA application for financial aid? Y	∕es □ No □	
Are you receiving the Calif	ornia Fee Waiver for Dependents? Ye	es 🗌 No 🗌	
Program of Study			
Has your major changed si	ince you were last certified to VA? Ye	s 🗆 No 🗆	
Is this a schedule change?	Yes 🗆 No 🗆		
Check appropriate semest	er/term. Use separate form for <u>each</u> s ect Course Number Numbe	emester/term. Fall 🗌 Spring 🗌 Sumn	ner 🗆
Subje		roromits Repeating Course? Y/N	

FOR OFFICE USE ONLY	
RECEIVED BY DATE RECEIVED NOTES	