



Shasta College

VETERAN/DEPENDENT STATEMENT OF UNDERSTANDING

Veterans Services • 11555 Old Oregon Trail • Redding, CA 96049

Phone: (530) 242-7701 • Fax: (530) 225-4987 • Email: jfisher@shastacollege.edu

The following statements are to assist you while you utilize your VA Education Benefits at Shasta College. We highly encourage you to stay up-to-date on changes or modifications to your benefits by monitoring the GI Bill/VA website or by contacting the VA directly at 888-442-4551. To avoid overpayments to the VA and the institution and to ensure maximum utilization of your benefits, please read and initial the list of student responsibilities outlined below.

_____ I understand it is my responsibility to provide Shasta College Veterans Services with my enrollment information **each** semester I want to utilize my Veteran Education Benefits by submitting a signed *Request for Certification of Veteran Education Benefits* form after registration.

Failure to do so will result in an interruption in my Education Benefits. Obtain form online at www.shastacollege.edu/veteranservices.

_____ I understand I am required to submit all prior college OFFICIAL transcripts to the Shasta College Admissions & Records Office.

_____ I understand I must meet with the Veterans Counselor to obtain a Comprehensive Educational Plan that includes a prior credit evaluation.

_____ I understand if I am receiving Chapter 30, 1606, or 1607 benefits, I am **required** to verify my attendance at the end of each month with the Department of Veteran Affairs online at www.gibill.va.gov/wave/ or by calling 877-823-2378.

_____ I understand the Department of Veteran Affairs will only pay for courses that meet graduation requirements for my program of study. They will not pay for recommended or suggested courses, repeats of "D" or better (except where a grade of "C" or better is required), challenged courses, audits, or any class that is not required for my current educational objective.

_____ I will promptly notify the VA School Certifying Official (SCO) of any changes (Adds/Drops/Withdrawals) that occur during the semester. I will also notify the SCO if I am unable to officially drop/withdraw but I stop attending classes at any time during the semester.

_____ I understand it may take the VA up to 8 weeks to process payments from the time I submit the *Request for Certification of Veteran Education Benefits*. Payments are made retroactive to the beginning of the semester according to my dates of attendance or to my effective start date of benefits. VA only pays for **actual seat time in class**; therefore, rate of pursuit/training time may vary during a semester that includes full term and short term classes. VA payments do not always arrive timely; please plan accordingly.

_____ I have read the [Veteran Success & Support Center Student Code of Conduct/Rights and Responsibilities](#) policies and agree to adhere to them.

_____ I understand I am required to make satisfactory progress toward my program of study to continue receiving VA Education Benefits. If I am dismissed from the college due to unsatisfactory progress or conduct, my VA Education Benefits will be terminated. For detailed information on Scholastic Deficiency and the Student Code of Conduct, please refer to the Shasta College Catalog.

I certify I have read and understand my responsibilities as they relate to the information provided herein. I hereby authorize the release of information concerning my veteran benefits and enrollment status to all Shasta College staff and to the US Department of Veterans Affairs. I agree that a photocopy of this release shall be as valid as the original.

Signature: _____ Student ID# _____ Date: _____

Return yellow copy to the Veterans Services Office