



Certification Form

Semester (ex: Fall 2016): _____

IUP Veterans Affairs Office
Pratt Hall, Room 104
201 Pratt Drive
Indiana, PA 15705

Phone: 724-357-3009
Fax: 724-357-3957
Email: veterans-affairs@iup.edu

Student Information Section

Name: _____ **Student ID:** @ _____

Email: _____ **Phone:** _____

Degree/Major: _____ **SS# or VA File Number:** _____

Education Benefits Section

GI Bill Chapter (Choose One):

- Ch. 33- Post 9/11 GI Bill*
- Ch. 1606- Selected Reserves*
- Ch. 30- Active Duty*

- Ch. 1607- Reserve Education Assistance Program (REAP)*
- Ch. 35- Dependents Education Assistance Program*
- Ch. 31- Vocational Rehabilitation*

Will you be receiving Federal Tuition Assistance (FTA)? YES NO

***Note:** If receiving FTA, you must provide us with a copy of the approval. The combination of FTA and Ch. 1606 cannot be used for the same classes. The use of FTA can also cause a reduction in your VA benefits.

Registration/Certification Section

ALL STUDENTS: Please enter below the information for the course(s) for which you want to be certified.

****If you do not wish to be certified for the semester, please initial here _____

Course Name and Number (ex: ENG 105)	Credits	Start and End Dates	R or D? (R for residential or D for distance learning and online courses)

Are you graduating this semester? _____

Student Signature: _____ Date: _____