University of Maryland, Baltimore - Graduate School

VA EDUCATIONAL BENEFITS DECLARATION OF INTENT

Complete this form to indicate your intent to be certified for receipt of VA Educational Benefits. Failure to complete each item will prevent you from receiving benefits for the requested semester.

This form must be completed each semester for which benefits are requested.

Part II: Re		nitial beside of and date.	each item.			
Part I: Stud	ent Info	<u>rmation</u>				
Name:		Last		First	MI	
Student Nun	nber: (@00				
Degree Prog	ram: _					
Level:	[☐ MS	PhD	Graduate Certifica	ate Of	her Graduate
Semester/Ye	ar: _					
Student Stat	us:	New Stu	dent	Returning Studen	nt 🗌 Tra	ansfer Student
Address:	5	Street				
	_(City		State	Zip	
SSN:						
SSN of Veter	ran: _	Only provide if using Chapter 35 (DEA):				
DOB:	I	/ / MM DD YY				
Home Phone	:					
Work Phone	: <u> </u>					
E-mail Addr	ess:					
Indicate the	type of b	oenefit for w	hich you are	eligible:		
Chapter Chapter Chapter Chapter Chapter Chapter	r 31 r 32 r 33 r 35	Vocational R Veterans Edu Post-9/11 GI Survivors &	ucational Assi Bill Dependents E	tive Duty and Employment VetSu stance Program—Post- Educational Assistance (ected Reserve	Vietnam Era	· ·

Yes

Yes

No

□ No

Other, please list:

Are you currently on active duty military status?

Will you be graduating this semester?

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Part II: Personal Responsibility For Receiving VA Educational Benefits

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	Administration. Any change in your registration such as adding or dropping courses
	must be reported to this office. The veteran/dependent will be given the opportunity
	to explain why he/she was unable to successfully complete the course(s). The VA will either accept the explanation and allow payment of benefits up to the date of
	drop, withdrawal, or failure, or terminate benefits for the course(s) effective the first
	day of the semester, creating an overpayment.
2.	
3.	
4.	You must pursue the course work as outlined in the Graduate School Catalog and as
	required by your department for your selected curriculum. This degree program/
	curriculum must be the same as indicated to the VA on the application for benefits.
	Courses that are not listed in the catalog will not be certified for benefits.
5.	The VA will not pay for repeated courses unless the particular course is a graduation requirement and was not passed the first time attempted.
6.	The VA will not pay for auditing courses.
7.	Credits by examination or for life experience will not be counted toward your enrollment for the receipt of VA benefits.
8.	You are permitted to take a maximum of five (5) credits per semester of independent
	study.
9.	All tuition will be certified at the In-State rate. The VA only covers in-state tuition rates. Any remaining balance is the responsibility of the student.
Part III: At	testation

I have read the above and I understand my personal responsibilities in claiming VA benefits. I realize that UMB is responsible for communicating accurate enrollment data to the Veterans Administration and that any failure on my part to comply with the above conditions jeopardizes my continued receipt of VA educational benefits.

SIGNATURE:	DATE:

Submit completed form with the following:

- Copy of your tuition bill
- Certificate of Eligibility (new students only)
- Change of Program/Place of Training (new students only)

School of Nursing Students only – Visit www.nursing.umaryland.edu/academics/registration/forms/ and submit requested information to:

and submit requested information to:
University of Maryland, Baltimore
School of Nursing

ATTN: Tara Byrd 655 W Lombard St Rm 108 Baltimore, MD 21201

tbyrd@son.umaryland.edu Fax: 410-706-7238 All other Graduate School Students

University of Maryland, Baltimore Graduate School ATTN: VA Certifying Official 620 W Lexington St 1st Floor Baltimore, MD 21201 gradforms@umaryland.edu

Fax: 410-706-3473