

Please **READ, INITIAL** and **SIGN** the back side of this page.
Important Requirements and Guidelines. Please read, initial and sign.

Initial

_____ I understand that the following requirements listed on this form are set forth by Montana State University-Northern Veteran's Service Office (VSO) and are for the purposes of administering my educational benefits only. It is my responsibility to seek and understand any additional requirements set forth by Montana State University-Northern in order to begin, maintain and/or end my enrollment at this institution.

_____ I understand that I must check both my mail and e-mail on a continuous basis for important information regarding my education benefits. I also understand that my mail and e-mail address must be updated with both the Montana State University-Northern VSO and on my Montana State University-Northern account.

_____ I understand that I must notify Montana State University-Northern VSO as soon as any of my personal information changes to include, but not limited to a change of address, phone number, name, etc.

_____ In addition to completing the required paperwork that was supplied to me by the Montana State University-Northern VSO, I understand that I must also complete the following form **EVERY** semester:

- 1) Education Benefit Certification Request Form (this form) - Located in the Montana State University-Northern VSO or online. I must also attach a current class schedule for that semester.

_____ I understand that I must complete the appropriate paperwork located in the Montana State University-Northern VSO in the event that I decide to change my major.

_____ I understand that I must notify the Montana State University-Northern VSO immediately upon a change in course load (adds, drops, withdraws, etc.) as this may result in an over/underpayment of my educational benefits.

_____ I understand that I will not receive educational benefits for retaking classes that I have already successfully completed.

_____ I understand that all remedial courses, internships, externships, independent studies, cooperative education agreements, and concurrent enrollments must be approved by the Montana State University-Northern VSO in order to be approved by the VA.

_____ I understand that I must supply the Montana State University-Northern VSO with all transcripts/transfer credits accepted by Montana State University-Northern within my first semester of enrollment.

_____ **I understand that by not complying with the above listed guidelines, my educational benefit payments may be delayed, suspended and/or I may be required to reimburse the Department of Veteran's Affairs for all or a portion of the educational benefit payments that I have received for this entire semester. I understand that the School Certifying official for Montana State University-Northern will share and submit student information, such as semester and hours registered, grades, billing information and directory information to the Department of Veteran Affairs. The information is confidential and shall be used only for the purposes of obtaining your GI Bill Education Benefits.**

Please refer to your "Summary of Educational Benefits" supplied by the VA or call the VA at the below listed phone number for a complete understanding of your educational benefits.

I have read and understand the requirements listed above

Signature

Date

Montana State University-Northern Veteran's Service Office
PO Box 7751
Havre, MT 59501
1-800-662-6132 ext. 3500
Fax: 406-265-3519

VA Regional Office, St. Louis
General VA Education Information:
www.gibill.va.gov
1-888-442-4551