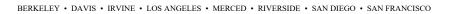
## UC Merced Veteran Services Veterans Enrollment Card





SANTA BARBARA • SANTA CRUZ

Student Information (Please print)	
Name	Student ID Number
	Birth UCM Email
Student Enrollment Verification	
What is your current major? Undergraduate  What is your current class level? Undergraduate  What is your current class standing? Freshman  Is this your last term of study?  Have you waived UC SHIP health insurance?  VA Benefit Information	Fall 20 Spring 20 Summer 20  How many units will you be enrolled in this term? Graduate SophomoreJuniorSenior YESNO YESNO
Which benefit are you eligible to receive?	
Ch.30 Montgomery GI BillCh.1606 Montgomery GI Bill-Selected ReservesCh.31 Vocational Rehabilitation	
Ch.35 Survivors & Dependents of Disabled VeteransCh.33 Post 9/11 GI Bill® (select oneVeteran or Dependent)	
Statement of Understanding	
Instructions: Check the box to indicate that you have read, understand and agree to the following:  I understand that the Veteran Enrollment Card must be submitted each term I wish to receive benefits.  I understand that it is my responsibility to notify UC Merced's Certifying Official of any changes in program (major/minor), unit change, or course withdrawal.  I understand that educational benefits will be paid only for courses that are applicable towards my declared degree program.  I understand that the VA will not pay for courses that I receive credit by exam, withdraw from, receive a non-passing grade based upon attendance, and receive a non-passing grade that is non-punitive.  I understand that I am responsible for all tuition and fees. In the event the VA does not pay my balance, it is my responsibility to pay all balances owed.	
I hereby authorize the release of information contained in my U Administration.	C Merced Veterans' educational file to the Veterans