

# Geneva College Application for Veteran Benefits

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Which program do you plan on entering? (Please Circle)**

- |   |   |
|---|---|
| 1. Graduate Studies                     | 2. Traditional Undergraduate- Main Campus |
| 3. Center for Urban Biblical Ministry   | 4. Adult Degree Completion Program        |
| 5. Center for Urban Theological Studies |   |

**What is your Program Major?** \_\_\_\_\_

**Have you applied for education benefits with the VA?** Yes: \_\_\_\_\_ No: \_\_\_\_\_

If No~ Submit Form 22-1990 to the VA Buffalo Office or complete online at [www.gibill.va.gov](http://www.gibill.va.gov).

**Have you previously used VA benefits at another school?** Yes: \_\_\_\_\_ No: \_\_\_\_\_

**Which benefits are you applying for? (Please Circle)**

- |                                  |  |
|----------------------------------|--|
| 1. Chapter 30- Active Duty       | 2. Chapter 32- VEAP                      |
| 3. Chapter 33- Post 911/ GI Bill | 4. Chapter 31- Vocational Rehabilitation |
| 5. Chapter 1606- Reservist       | 6. Chapter 1607- REAP                    |
| 7. Chapter 35 - DEA              |  |

**If applying for Chapter 33 benefits, what percentage of maximum benefit payable do you expect to receive based on the included chart?**

\_\_\_\_\_

Individuals serving an aggregate period of active duty after September 10, 2001, of:	Percentage of maximum benefit payable
At least 36 months	100
At least 30 continuous days and discharged due to service-connected disability	100
At least 30 months < 36 months	90
At least 24 months < 30 months	80
At least 18 months < 24 months	70
At least 12 months < 18 months	60
At least 6 months < 12 months	50
At least 90 days < 6 months	40

Are you currently on active duty?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Will you be receiving active duty housing benefits?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

(Active duty students and their spouses cannot receive the Monthly Housing Allowance)

Please attach a copy of one's DD-214. For students receiving parental or spousal benefits, please include a copy of the Veteran's DD-214. Also, please attach a copy of the eligible student's Certificate of Eligibility.

### \*\*\*Important Information\*\*\*

**You must inform your Veterans Representative at Geneva College of all Schedule Changes.**

(The office will make adjustments to this certification upon your notification or our discovery.)

**Student is to notify their Geneva VA Counselor if:**

1. The student withdraws from a course or all courses: failure to do this at the time of withdrawal can result in an overpayment of the entire semester.
2. The student has to change their address.
3. The student has to change their name.
4. The student is called to active duty.

**GI Bill will not pay for:**

- Repeat courses that were completed successfully.
- A course that does not count towards the student's degree.
- Courses if the student fails to maintain a cumulative QPA of a 2.0

Geneva Veteran Contacts:

**ADCP-** Bobbi Griffith  
[bgriffit@geneva.edu](mailto:bgriffit@geneva.edu)  
Phone: 724.847.6755  
Fax: 724.847.6839  
ADCP Building

**All Other Programs-** Alan Flick  
[aaflick@geneva.edu](mailto:aaflick@geneva.edu)  
Phone: 724.847.6533  
Fax: 724.847.6776  
Financial Aid Office

*It may take up to 5-7 weeks before you start receiving your benefits once classes begin. Make sure that you make arrangements now for your tuition to be paid or that your Financial Aid is in place to prevent being removed from your classes for non-payment. \* As a note: There may possibly be adjustment to projected aid from Geneva depending upon the amount of Veterans benefits one is eligible to receive. The financial aid office will let you know if there is an adjustment.*

*I understand that I am responsible for my student account balance if the U.S. Department of Veterans Affairs (VA) does not pay for the full amount for my tuition and fees.*

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_



GENEVA COLLEGE