
Request for Certification forms are to be completed and submitted to the Veteran School Certifying Official (SCO) every semester you wish to utilize education benefits. In order to be certified in a timely manner, you must submit this form to the SCO within 30 business days before the start of the term, unless otherwise indicated.

PERSONAL INFORMATION:**LAST NAME:****FIRST NAME:****STREET ADDRESS:****CITY:****STATE:****ZIP CODE:****EMAIL ADDRESS:****PHONE NUMBER:****DATE OF BIRTH:****STUDENT ID NUMBER:**

MM/DD/YYYY

CHAPTER & SEMESTER INFORMATION:**I am eligible for VA Education Benefits through the following program:**

Montgomery GI Bill – Active Duty (MGIB-AD) - Chapter 30

Post-9/11 GI Bill Veterans Educational Assistance Act of 2008 - Chapter 33

Montgomery GI Bill - Selected Reserve (MGIB-SR) - Chapter 1606

Reserve Educational Assistance Program (REAP) - Chapter 1607

Vocational Rehabilitation and Employment - Chapter 31

Survivors' and Dependents' Educational Assistance Program - Chapter 35

I am a:

Veteran

Veteran Dependent

Branch (Skip if Veteran Dependent):**I am requesting certification as a:****Semester & Year Requesting Certification:**

Full-time student (12 or more credits)

3/4-time student (9-11 credits)

1/2-time student (6-8 credits)

Less than 1/2-time student (5 credits or less)

Semester & Year

Valid Semesters:

Fall (September-December)

Intersession (January)

Spring (January-May)

Summer (May-August)

Program of Study:

CHAPTER & SEMESTER INFORMATION CONTINUED:

Will you be waiving the Berkshire Community College Student Health Insurance?

Yes

No

Not Applicable - I am in less than 9 credits or I already waived it in Fall.

You will need to either waive or accept your Student Health Insurance charge by creating an account and logging into Gallagher Student.

Please be aware: If you were enrolled in fewer than 9 credits in the Fall or if Spring is your first semester, you must complete this process in the Spring.

I am requesting Advance Payment (minimum of 30 days prior to the start of the term; not applicable to Chapter 33 or 31).

Yes

No

Not Applicable - I am utilizing Chapter 33 or 31 VA Education Benefits.

Do you intend to complete the Categorical Tuition Waiver?

****Only Applicable to Veteran & Active Duty Members.****

Yes

No

Not Applicable - I am not a Veteran.

*To determine if you are eligible, please visit the eligibility requirements provided by the Massachusetts Department of Higher Education found [here](#).

**If you are eligible and interested in completing the Categorical Tuition Waiver, please submit the completed form along with your Request for Certification Form and a copy of your DD214. Please note, you must complete this once per academic year. The waiver may be opened from [here](#).

Section 1018 - College Shopping Sheet

Please confirm you have both accessed and reviewed your College Shopping Sheet, available in your [Self-Service](#) account, for the academic year by checking the box below.

I have accessed and reviewed my College Shopping Sheet for the academic year.

STUDENT RESPONSIBILITY CHECKLIST:

I have read and agree to the following:

I understand that I will need to remain at full-time status with full-term courses in order to receive my full educational/housing benefit entitlement.

I understand all of my courses I am taking must apply to my program in order to be certified to the VA.

I understand the VA will not cover repeating of a course for which credit has already been earned.

I understand if all of my courses are online, the VA may pro-rate my eligibility rate.

I understand completing a FAFSA or MASFA is required to be considered for federal aid (PELL grant and loans) and state grants (MassReconnect, MassEducate, etc.). Without a FAFSA or MASFA aid from these programs will not be considered when creating my College Finance plan.

I will report program and registration changes or if I stop attending class/classes to the Veteran Certifying Official.

I understand that "W"(withdraw) and "F" (failing) grades may result in reduced payment from the VA and I could potentially owe the college money.

I understand classes which are scheduled to meet for a shorter period of time than the normal semester term dates may be paid at a different rate based on the number of credits and length of course.

I will notify the Veteran Certifying Official before the start of the semester if my benefit chapter changes.

I understand that if I fail to comply with above, it could result in an overpayment/underpayment from the VA and I could potentially owe the college money.

I authorize BCC to release information from my academic records to the VA.

Please be aware, your signature on this form indicates you have reviewed and agree to all information provided on this form.

STUDENT'S SIGNATURE:

DATE: