

Office of Veteran Affairs: Benefit Recertification

NAMI	E	_ SS#		
I wish t	to use my VA benefits under Chapter	for the	, semester of 20,	
MAJOR	OR ACTIVE DUTY: Yes / No			
this for Mississ	m is completed and returned to the Office ippi Delta Community College SCO perm this document I accept the following requ	of Veterans Affairs. hission to certify elig	By signing this document, I give the	
•	The classes I am certifying for are part of If I enroll in courses not listed on the deg Each semester after registration, I will brill there are classes, that I do not want certaining such or list them at the bottom of I am aware that the VA payments are paid the month of September at the beginning I am aware that the SCO will certify me at of the delay in payments. Example: If I am payment the beginning of October. I will notify the SCO of any changes to make the Reduction of my course load could affect receive. In this instance, if a debt is cause Not attending or withdrawing from cours responsible to repay.	gree plan, they will ring a schedule to my tified, I will inform this form with specified in arrears. Example of October, etc. after the add/drop permitted at the beginny enrollment, address my VA benefits by the difference of the sume all responses.	not be certified. SCO. The SCO with a written document fic direction. The student receives payment for riod of the new term and I am aware ginning of September, I will receive ss, status, or degree plan. The reducing or stopping the amount I insibility regarding repayment.	
Student	Signature		Date	

Mississippi Delta Community College does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The following person has been designated to handle inquiries regarding the non-discrimination policies: The Associate VP for Institutional Effectiveness, Boggs-Scroggins Student Services Center, P.O. Box 668, Moorhead, MS 38761, 662-246-6558.