

 $\Box$  For UG/VET/AD = MREG

William & Mary Office of the University Registrar Blow Memorial Hall Room 240 P.O. Box 8795 Williamsburg, VA 23187-8795 (757) 221-2800 Fax: (757) 221-2151 vabenefits@wm.edu

## VA BENEFITS INFORMATION SHEET

Revised: 9/2023

ame:					
Last	First	Middle			
ailing Address:					
	Street Address, Apt #, P.O Box	City	State	Zip	
udent Mobile #: (	)	Home Telep	ohone #: ()		
udent Level:	☐ Undergraduate		Graduate	☐ Non-Degree Seeking	
udent VA Status	-Identify your benefit as the	student.			
	Please choose one				
st 9/11 GI Bill® (Ch	apter 33) Benefit: Otho	er VA Education	nal Benefits:		
Active Duty		Active	Duty (Ch 30)		
Veteran		Vetera	Veteran (Ch 30)		
Dependent (Spouse)		Dep. E	Dep. Educational Assistance (Ch 35 - Dependent or Spouse)		
Spouse on Active Duty		Reserv	Reservist or National Guard (Ch 1606)		
Dependent (Child	1)	REAP (Ch 1607)			
		Vetera	n Readiness & Employme	nt VR&E (Ch 31)	
<ul><li>which I am el</li><li>I understand</li><li>School Certify</li></ul>	I am ultimately responsible for igible or any temporary tuition this form covers my first sementing Official's (vabenefits@wm. 3 students only: I understand	memos that I in the ster only at W&	may receive.  M to use the benefit, and to use	and I must respond to the VA	
(bursar@wm	.edu) once an academic year a	signed W&M's	GI Bill Promissory Not	<u>e</u> .	
ignature:			Date:		
(No fo	ont signature)				
FOR OFFICE USE ON	LY:				
	Assigned YR# (if necessary)				
OR				Added to Spreadsheet	
□ Copy of VONApp □ Copy of DOD Transfer Memo				Vet ID# SPAIDEN Added in Enrollment Manager	
□ Education Enrollment S	status/Entitlement Information Received			VA File # (Student)	
OR □ Statement of Ben				Ch 35 VA File Payee Number	