



AR Form 20

Request for VA Payment

1. Complete this form each semester or session for which you enroll and want to be paid.
2. Courses previously completed and passed cannot be re-certified for payment.
3. It is your responsibility to report class changes or withdrawals to this office and the VA as they occur.
4. Report changes to your schedule by checking **Initial Request, Revised Request, or Terminate Request** and listing the added and/or deleted classes.
5. Any classes listed on this form for payment *must be on your student education plan provided by your Academic Counselor!*

This is a/an: Initial Request: Revised Request: Terminate Request:

Attending: Spring yr _____ Summer yr _____ Fall yr _____ Winter yr _____

Name: _____
Last First Middle

Date of Birth: _____ Social Security #: _____

Current Address _____
Street Apt# City Zip

Telephone Number: _____ Email _____

Major: _____ Are you taking short-term courses? _____

List courses currently registered for or dropped courses:

Class Code (ie. HIS 110)	Course Description (ie. World History)	Units	Add	Delete

I certify to the best of my knowledge the above information to be true and correct and that I am not duplicating courses I have successfully completed. I accept full responsibility to notify the Admissions & Records office and the VA of any changes in my enrollment effective upon the changes. I also understand that I will have to pay back to the Department of Veteran’s Affairs any overpayment made to me.

Today’s Date _____ Signature: _____