



SCC Request for Military Education Benefits Form

Legal Name (Last, First, MI)

SCC ID#

Current Mailing Address (P.O. Box, Street, City, State, Zip Code)

Phone Number

Email Address

1. **What semester do you plan on using your benefits?** Fall Spring Summer
(Please only select one term)

2. **Is this your first semester of enrollment at SCC?** Yes No

If Yes, did you receive VA Education Benefits at a previous school? Yes No

If Yes, have you completed a change of program form with the VA? Yes No

3. **List your VA approved program of study:** _____

Have you recently changed your program of study (major)? Yes No

If Yes, have you completed a change of program form with the VA? Yes No

4. **Do you plan on graduating at the end of this semester?** Yes No

5. **What is your current military status?**

I am currently Serving on Active Duty

I am currently serving in the Reserves or Guard

I am a Veteran

I am a dependent of a Service Member/Veteran

6. **Do you currently reside in the state of Illinois?** Yes No

If No, please provide your current state of residence _____

Benefits Selection

Please select the VA Benefit that you will be using this semester:

- None
- Chapter 30 (MGIB-AD)
- Chapter 31 (VR&E)
- Chapter 33 (Post 9/11 GI Bill)
- Chapter 35 (DEA) – Sponsors SS# _____
- Chapter 1606 (MGIB-SR)

Please select any State benefit(s) that you will be using this semester:

- None
- Illinois National Guard (ING)
- Illinois Veterans Grant (IVG) – IVG# _____
- MIA/POW – MIA/POW# _____

Will you be using other types of aid this semester?

- None
- Federal Aid (Pell Grant, FSEOG)
- Private Loan
- Scholarship
- Other (Upward Mobility, WIOA, DORS, Tuition Assistance, Etc.)

Agreement

I understand and agree to the following:

- I am responsible for tracking my own benefit(s) through the VA, DOD and/or ISAC:
 - Federal VA Benefits can be tracked on the [WAVE system](#) or by calling the VA Education Center Student line at 1-888-442-4551
 - State Benefits can be tracked on the [ISAC Student Portal](#) or by calling ISAC Student Services at 1-800-899-4722.
- I am responsible for paying all tuition and fees that are not covered by military benefits.
- I am responsible for checking my SCC Student Account regularly. If I notice that my benefit(s) have not been applied, I will contact SCC Student Financial Aid before the end of the semester.
- I understand if I wait until after the semester ends my benefits may not be applied to my account for the requested semester.
- If using a Federal Benefit, I understand that I must verify enrollment at the end of each month with the VA by calling 1-888-442-4551 or by using the [WAVE system](#).
- It is my responsibility to check my GI Bill payments and ensure my enrollment is correctly reported to the VA.
- I will report all changes made in my enrollment to SCC Financial Aid Office within **3** Business days.
- If using a state benefit, I understand that SCC bills ISAC according to eligibility information furnished by the commissions. When ISAC rejects a claim (usually after the semester is over), I am responsible for the portion of tuition and fees not paid by the commission.
- The Illinois Veterans Grant (IVG) only covers tuition and mandatory fees. I am responsible for paying all non-mandatory fees charged to my student account.
- The Illinois National Guard (ING) grant only covers tuition and minimal mandatory fees. I am responsible for paying all other fees charged to my student account.
- If using IVG or ING with the Post 9/11 GI Bill my state benefits will be adjusted according to the guidelines established by the Illinois Student Assistance Commission.
- It is my responsibility to check my SAP status before the start of each semester. This can be done online through Self-Service.
- It is my responsibility to submit a new SCC Request for Military Education Benefits Form and a class schedule to the SCC Financial Aid Office each semester.
- I understand that the School Certifying Official has **30 days** to certify my eligibility once all documents have been received.

To protect confidential information, please bring this form and all other documents (Certificate of Eligibility, DD-214 Member 4 Form, Current Schedule, Etc.) to the SCC Financial Aid office.

I have read this application and understand my responsibilities. I certify, under the penalties for perjury as provided by law, that all information on this application is true and correct.

Student Signature _____ **Date** _____

Contact Us:

Shawnee Community College, Financial Aid Office, 8364 Shawnee College Road, Ullin, IL 62992

Phone: (618) 634-3200, Option #1, then Option #2 **E-mail:** finaid@shawneecc.edu