

CERTIFICATION REQUEST FORM

(Please register for courses first, then submit form)

REQUESTED TERM TO BE CERTIFIED:

☐ Fall 20__ ☐ Spr Int 20__ ☐ Spring 20__ ☐ Sum 20__

RSCCD HOME CAMPUS: ☐ SAC Santa Ana ☐ SCC Santiago Canyon
Courses being taken at the non-home campus location cannot be certified by the Home Campus. Your home campus Certifying Official will send a Parent Letter to the sister campus for certification, if the courses apply towards your educational program. Financial Aid applications will also be processed at their respective Home School.

STUDENT BENEFIT TYPE:

☐ Veteran, Ch. 33, 9/11 ____% ☐ Veteran, Ch. 30 MGIB
☐ Dependent, Ch. 33TOE ____% ☐ Reservist, Ch. 1606
☐ Dependent, Ch. 33FRY ☐ Veteran, Ch. 31, Voc Rehab
☐ Dependent, Ch. 35 DEA

STUDENT PHONE NUMBER: (____) ____ - ____

STUDENT STREET ADDRESS: _____

CITY: _____ STATE: ____ ZIP: _____

Student ID _____ VA File # _____
Last Name _____ First Name _____ MI _____
If Dependent (CH35), Payee # _____ DOB (mm/dd/yyyy) _____
E-mail address: _____

PLEASE PRINT CLEARLY! This is how we & the VA will contact you.

BRANCH OF SERVICE:

☐ Army ☐ Air Force ☐ Navy ☐ Marines ☐ Coast Guard



- EDUCATIONAL PLAN** in file current? ☐ YES ☐ NO. If No, when is your counseling appointment for an Educational Plan?
Appointment Date: ____/____/____ Counselor Name: _____ Turn the Ed Plan to us ASAP.
- LIST ALL COLLEGES/UNIVERSITIES** you previously attended: Official Academic Transcripts from ALL previously attended colleges & universities including military transcripts must be evaluated in Admissions & Records. They are also needed so your academic counselor can make an accurate Educational Plan for you. **IMPORTANT *****You will only have ONE semester to provide official transcripts or certification will be suspended for any future requests. However, unofficial transcripts are required prior to certification and must be applied to your current educational plan.*******
(IF YOU'VE ATTENDED MORE COLLEGES THAN THE SPACE PROVIDED, PLEASE LET THE VRC STAFF KNOW)

☐ I have attended colleges or universities before coming to Santa Ana College. Please list them below.
☐ I have not attended any colleges other than Santa Ana College/Santiago Canyon College (Skip to #3)

Name of College/University	City/State/Country	Terms (ex: Spring 14 - Fall 15)	Degrees/Certificates Earned: (ex: AA, BA etc.)	Official Transcripts Submitted to Admissions
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

☐ More colleges, list them here:

- I AM ALSO TAKING COURSES AT THE FOLLOWING COLLEGE DURING THIS SAME TERM:** ☐ Yes ☐ No
If yes, Name of College/University: _____ (Please see a VRC staff about Parent Letter if you want the courses certified at the other institution)
- EDUCATIONAL GOAL:** Please check **ONLY ONE** goal (MUST match your Educational Plan in your VRC file)
☐ AA/AS ONLY, MAJOR : _____
☐ AA/AS TRANSFER to a CSU, List MAJOR : _____
☐ Bachelors Degree Transfer Program ONLY: List Major: _____ List ONE University: _____
☐ VOCATIONAL CERTIFICATE: List program: _____ [Not all certificates are VA approved]
- The last time I used my VA benefits was at:** College/University: _____ Term: _____
- Units I want certified:** ☐ **List courses here:** _____

WARNING: Chapter 33 students must have an enrollment status of more than half time for MHA eligibility (6.1 units or more or 51% or higher for a standard term)
For standard semesters: 12 or more units = Full Time
9-11.9 units = 3/4 Time
6-8.9 units = Half Time
0.5-5.9 units = Less than 1/2 Time
For non-standard terms: (ex: Summer session, 1-8 week courses, Spring Intersession, CJ Academies)
Please use the following formula for the enrollment status:
credit x 18 / wks / 12 = ____%
[ex: 4 unit Biology course, 8 weeks long, would calculate, 4 x 18 / 8 / 12 = 75%.
Student would get paid equivalent to 9 units which is at a 3/4 time status]

STUDENT: PLEASE READ, INITIAL, AND SIGN BELOW:

INITIALS

I am registered in courses approved by my counselor based on my Educational Plan. **Online (Web) Remedial Courses are NOT approved.**

It is my responsibility to notify the VRC if/when I **delete, add, or withdraw from ANY of my classes.**

I have read and received a copy of the General Information document and understand my responsibilities. If I neglect my responsibilities, **I WILL ACCEPT FULL LIABILITY** for any overpayment that may occur from the Veterans Affairs Administration.

I understand that my paperwork will be processed in dated order, and that the classes I'm registered in may or may not be approved for certification by the Certifying Official due to various reasons upon review (e.g. Courses not required for educational goal, prior credit from other institutions and/or current institution already fulfill certain requirements, academic standing issues, missing transcripts, other missing information, etc.)

Ch 30, 35 and 1606, I understand that my classes will be dropped 72 hours, including weekends, after registering for non-payment. I can either pay out of pocket or apply & qualify for the CA College Promise Grant to protect my courses from getting dropped. For Ch 33, 31, 33TOE, and Fry, your courses will be protected by turning in this request for Certification.

Effective August 1, 2018, MHA will be calculated based on where I **physically** attend the majority of my classes.

I certify that the information indicated on this form is true and correct.

Student Signature

Date