

## CHAPTER 1606

This information has been given to you to assist you in applying for your Selected Reserve GI Bill education benefits at Sierra College. You can obtain GI Bill benefits for the AA/AS degrees offered by Sierra College, or you may declare a Transfer Major for a BA/BS degree (see Veterans Office staff for more information as there are specific limitations for declaring a Transfer Major at a two-year community college. VA requires that all students complete the matriculation process.

Please keep in mind that the VA will only pay for required courses based on your major, beginning with your initial enrollment.

To initiate your benefits for the first semester, please complete the following steps and turn all documents in to the Sierra College Veterans Affairs Office:

1. **COMPLETE VA FORM 22-1990 Application for Education Benefits.** (*If you are transferring here from another school at which you used V.A. Education Benefits, you must complete VA FORM 22-1995 instead*).
2. **COMPLETE THE SIERRA COLLEGE VETERANS ENROLLMENT CARD** -both sides and sign. (NOTE: A new enrollment card must be completed EVERY semester you wish to receive benefits. This is done at the time of registration).
3. Bring this office a copy of your class schedule/receipt that you receive from Admissions when you have registered and paid your fees.
4. VA requires a copy of your DD FORM 2384, Notice of Basic Eligibility, which you get from your unit. If you also have served one or more years on active duty, you must bring this office a copy of your DD214, Member 4 Copy, in order to be granted Military Credit by Sierra College.
5. If you want to receive Advance Payment, and you are eligible and within the deadline to apply, **COMPLETE VA FORM 21-4138.**
6. **TAKE THE ASSESSMENT TESTS** for Math, English, and Reading. If you took these tests at another school, you must have the results sent to our Assessment Office. To continue your benefits for your second semester, you must complete the following before your benefits may be certified:
7. **PROVIDE THIS OFFICE WITH OFFICIAL TRANSCRIPTS OF ALL OTHER COLLEGES Attended.** This includes any colleges you attended either before, during, or after your military service. Official transcripts must be in officially sealed, unopened, school envelopes.
8. **A STUDENT EDUCATION PLAN (SEP) MUST BE DONE BEFORE YOU REGISTER FOR YOUR SECOND SEMESTER.** This education plan is based on your VA approved program of study and will list out each class you need to take in order for you to receive your AA/AS degree or to transfer to a 4-year college. Before this office will make an SEP appointment, you must have completed all of the previous steps listed above. Please call the Sierra College Veterans Affairs Office to schedule this SEP appointment.

Once you are certified by this office to the VA, it will take approximately 6-8 weeks before you receive an Award Letter from VA. Your first check should arrive shortly thereafter (EXCEPT FOR THOSE STUDENTS WHO RECEIVE AN ADVANCE PAYCHECK).

Each semester you will be required to verify your attendance in each of your classes with this office in the final month of the semester. This Verification of Attendance form must be signed by each of your instructors. There are specific due dates for this form each semester. Check with the Veterans Affairs Office staff for more information.

You are required to maintain specific standards of progress as listed in the Sierra College Catalog each year. Please familiarize yourself with the Academic Regulations at Sierra College by reading your catalog. Direct any questions to the Veterans Affairs Office.

\*\*\*NOTE: If you are transferring to Sierra College and have 30 or more college units completed, you must complete steps 1 through 8 before the Sierra College Veterans Affairs Office will certify your enrollment to VA.





**REQUEST FOR CHANGE OF VA EDUCATION PROGRAM OR PLACE OF TRAINING**

<b>IMPORTANT:</b> Please read the attached instructions <u>before</u> completing this form. Please type or use ink to complete the form. If you need more space, use the back of this form and write the item number next to your answer.		1. VA FILE NUMBER AND/OR SOCIAL SECURITY NUMBER
2. FIRST-MIDDLE-LAST NAME OF APPLICANT	3A. HOME TELEPHONE NO. <i>(Include Area Code)</i>	3B. WORK TELEPHONE NO. <i>(Include Area Code)</i>
4. MAILING ADDRESS <i>(No. and address or rural route, city or P.O., State and ZIP Code)</i>	5. ANSWER ONLY IF YOU'RE A FEDERAL GOVERNMENT EMPLOYEE: DO YOU EXPECT TO RECEIVE EDUCATIONAL BENEFITS UNDER THE GOVERNMENT EMPLOYEE'S TRAINING ACT FOR THE SAME TIME YOU WILL RECEIVE VA EDUCATION BENEFITS? YES <input type="checkbox"/> NO <input type="checkbox"/>	

**YOUR PROGRAM**

6. WHAT EDUCATION, PROFESSIONAL OR VOCATIONAL GOAL ARE YOU WORKING TOWARD? <i>(Highest degree or occupation)</i>	7. WHAT'S THE NAME OF THE PROGRAM YOU'RE REQUESTING? <i>(Specific degree, major, certificate, diploma)</i>
8. HOW WILL YOU TAKE THIS TRAINING? <input type="checkbox"/> SCHOOL ATTENDANCE <input type="checkbox"/> COOPERATIVE TRAINING <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> FLIGHT TRAINING <input type="checkbox"/> APPRENTICESHIP OR ON-THE-JOB TRAINING <input type="checkbox"/> INDEPENDENT STUDY DISTANCE LEARNING/INTERNET	9A. NAME OF YOUR <b>NEW</b> SCHOOL OR TRAINING ESTABLISHMENT
	9B. NAME OF YOUR <b>OLD</b> SCHOOL OR TRAINING ESTABLISHMENT
10. TELL US <b>WHEN</b> AND <b>WHY</b> YOU STOPPED TRAINING AT YOUR PRIOR SCHOOL OR ESTABLISHMENT.	

**CURRENT DEPENDENCY INFORMATION**

ANSWER ONLY IF YOU'RE RECEIVING CHAPTER 30 (MGIB) BENEFITS AND SERVED ON ACTIVE DUTY BEFORE JANUARY 2, 1978.

11A. ARE YOU CURRENTLY MARRIED? YES <input type="checkbox"/> NO <input type="checkbox"/>	12. HOW MANY DEPENDENT CHILDREN DO YOU CLAIM? _____
11B. SPOUSE'S NAME	13. DO YOU CLAIM ANY PARENTS AS DEPENDENTS? YES <input type="checkbox"/> NO <input type="checkbox"/>

**CURRENT ACTIVE DUTY INFORMATION**

14. ARE YOU NOW ON ACTIVE DUTY?  <input type="checkbox"/> NO (IF NO, GO TO ITEM 16A) <input type="checkbox"/> YES (IF YES, GIVE DATE ACTIVE DUTY BEGAN) _____
15. DO YOU EXPECT TO RECEIVE EDUCATIONAL BENEFITS FROM THE ARMED FORCES OR PUBLIC HEALTH SERVICE DURING ANY PART OF YOUR TRAINING?  <input type="checkbox"/> YES <input type="checkbox"/> NO (BE SURE TO HAVE YOUR EDUCATION SERVICE OFFICER COMPLETE ITEM 17.)

**CERTIFICATION AND SIGNATURE OF APPLICANT**

I HEREBY CERTIFY THAT all my statements on this form are true and complete to the best of my knowledge and belief.

PENALTY: Willful false statements as to a material fact in a claim for educational benefits is a punishable offense and may result in forfeiture of these and other benefits, and in criminal penalties.

16A. SIGNATURE OF APPLICANT <i>(Do Not Print)</i>	16B. DATE SIGNED
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**CERTIFICATION NEEDED FOR PERSONS ON ACTIVE DUTY**

*(THIS ITEM DOESN'T APPLY TO SELECTED RESERVISTS OR VETERANS NOT ON ACTIVE DUTY.)*

I CERTIFY THAT this individual is a member of the Armed Forces and has consulted with me regarding his or her education program.

17A. SIGNATURE, TITLE, AND BRANCH OF SERVICE OF EDUCATION SERVICE OFFICER	17B. DATE SIGNED
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## INSTRUCTIONS & INFORMATION

### When Should You Use This Form?

You should use this form if:

- you're changing schools, **or**
- you're changing your educational, professional, vocational goal, **or**
- you left your program due to unsatisfactory attendance, progress, or conduct; and you're now reentering the same program, **or**
- you were receiving VA education benefits as a veteran and now wish to receive benefits while on active military duty.

### Instructions for Specific Items on the Form

Most items on this form request information that you know. Here are a few things you should keep in mind when completing the following items:

**Item #1** The number that appears on your benefit checks and on all mail we've sent is your VA File number. Usually your Social Security number is your VA file number. Write your Social Security number in item #1. If you also have a VA File number that's different from your Social Security number, write it in the box as well.

**Item #6** Here are some examples of what we mean by "goals":

- Educational goal: GED certificate, high school diploma, bachelor degree, master degree, Ph.D.
- Profession goal: lawyer, physician, teacher, physical therapist, medical technologist, medical records librarian.
- Vocational goal: stenographer, machinist, electronic technician, X-ray technician, radio and TV service technician, automobile mechanic, practical nurse

**Item #9A** If you're changing schools or training establishments, show your **new** school or training establishment here.

**Items #11, 12 & 13** If you're receiving Montgomery GI Bill benefits (also known as chapter 30 or MGIB) and you had military service before January 2, 1998, you may qualify for increased education benefits for having dependents. Complete a VA Form 686c if there's been a change in your dependents.

**Item #17** Your Education Service Officer must sign the form if you're on active duty. This doesn't apply if you're in the Selected Reserves, or if you're been discharged from service.

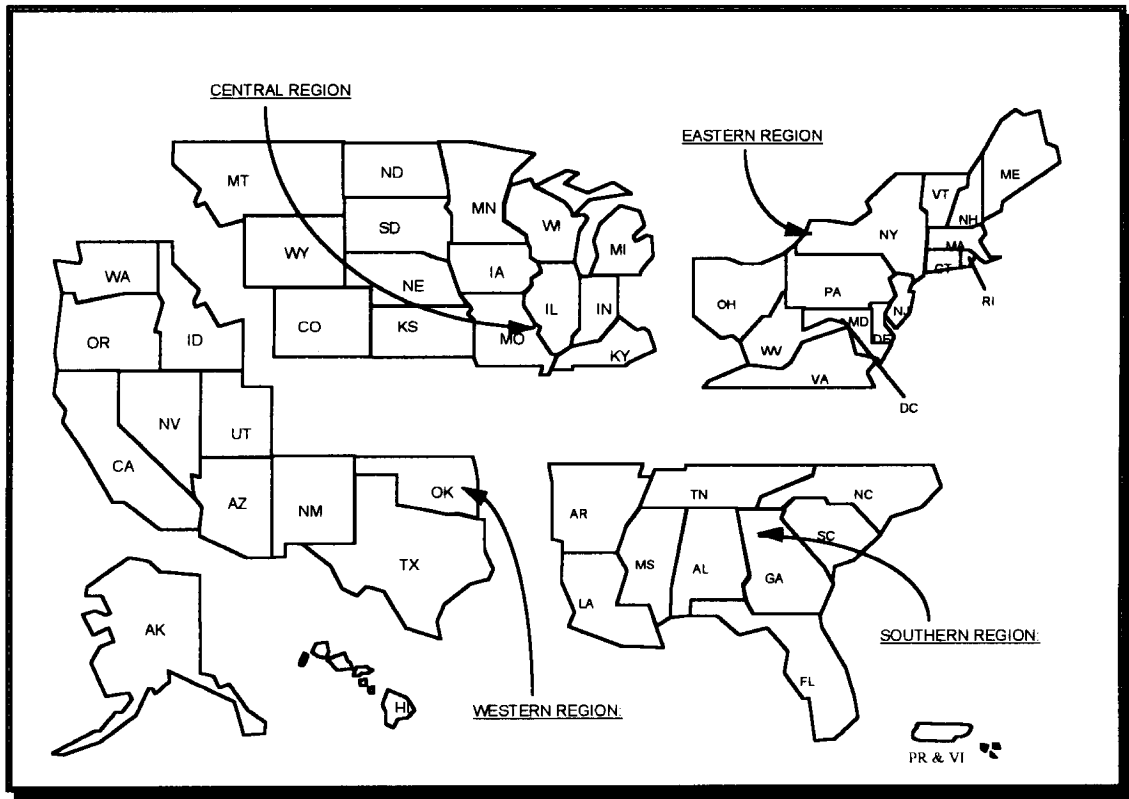
### If You Need Help

If you need help in completing this form, or if you want information about our work-study program or direct deposit, call us toll free at 1-888-GI-BILL-1 (1-888-442-4551.) If you're hearing impaired call 1-800-829-4833. Please call 1-800-827-1000 if you want a VA counselor to help you in planning your program. You can also contact us through our home page on the World Wide Web (internet.) Our national home page address is:

<http://www.gibill.va.gov>

## Where Do You Send The Completed Form?

There are four regional education processing offices that handle education claims for the entire country, which we have divided into regions. The map below shows the states in each region. Find the state where you'll be attending school or job training. You should **mail** your completed form to the processing office for that region.



### WESTERN REGION:

VA Regional Office  
PO Box 8888  
Muskogee, OK 74402-8888

### EASTERN REGION:

VA Regional Office  
PO Box 4616  
Buffalo, NY 14240-4616

### CENTRAL REGION:

VA Regional Office  
PO Box 66830  
St. Louis, MO 63166-6830

### SOUTHERN REGION:

VA Regional Office  
PO Box 100022  
Decatur, GA 30031-7022

**RESPONDENT BURDEN:** You don't have to complete this form and VA can't require you to respond unless this form's OMB Control Number which is 2900-0074 is valid. The OMB Internet Home Page ("[www.whitehouse.gov/OMB/index.html](http://www.whitehouse.gov/OMB/index.html)") shows the OMB Control Numbers for VA approved forms. However, we can't take any further action on your claim unless you send us the information requested on this form. We estimate you'll need about 12 minutes to review the instructions find the information, and complete this form. Call 1-888-GI-BILL-1 (1-888-442-4551) if you have comments regarding this 12 minute estimate or any other aspect of this collection of information.

**PRIVACY ACT INFORMATION:** We'll use the information on this form to determine your continuing eligibility for educational benefits. We cannot take any action on your claim for benefits until we receive your completed form (38 U.S.C. 3471) Your responses are confidential (38 U. S. C. 5701). They may be given outside VA only if authorized under the Privacy Act, including the routine uses identified in the VA system of records, 58 VA 21/22, Compensation, Pension, Education and Rehabilitation Records - VA, published in the Federal Register. The information you send may be verified through computer matching programs with other agencies.