WESTMORELAND COUNTY COMMUNITY COLLEGE

Veteran's Initial Request to use Benefits

NAME: _____ **SSN:** _____

Westmoreland ID #: _____ **Phone:** _____

SERVICE BRANCH: _____

CHAPTER:

- ___ **30** (Active Duty)
- ___ **31** (VA Readiness & Employment)
- ___ **35** (Dependent of a Veteran)
- ___ **33** (Post 911)
- ___ **1607** (REAP)
- ___ **1606** (Reserve/Nat'l Guard)

What documents should be provided to Westmoreland's Certifying Official?

___ **DD-214 Member 4 Copy** (Certificate of Release or Discharge from Active Duty). Please turn this document in to the Enrollment Center or email to militarybenefits@westmoreland.edu

___ **Copy of official transcripts** from all previous colleges and military transcripts (if applicable) should be submitted to the Registrar's Office or transcripts@westmoreland.edu

___ **Copy of Kicker Program documentation** (if applicable).

___ **Notice of Basic Eligibility (NOBE)** if you are in the Reserves.

___ **Certificate of Eligibility** (you will receive this from the regional VA office once a determination on your eligibility is made). Prior to receiving your COE, you may submit a copy of the screen showing your eligibility as listed from on your eBenefits and WAVE Benefits page

___ **Copy of Veteran's Request for Certification** (fillable form on our website under financial aid)

CURRENT MAJOR: _____

for office use

VETS _____ **STUD TYPE** _____ **VA-EM** _____