

RPCC VA EDUCATION ENROLLMENT FORM

Chapter

Empty box for chapter number

LoLA# _____

SEMESTER

____ Fall ____ Spring ____ Summer Year: 20____

Check One Below

Active Duty ____ Active Duty Spouse ____ Active Duty Child ____

Veteran ____ Veteran Spouse ____ Veteran Child ____

LA National Guard ____ Reserves ____

STUDENT INFORMATION

NAME _____ VETERANS SSN _____ - _____ - _____ (____)

ADDRESS _____ STUDENTS SSN _____ - _____ - _____

CITY/STATE/ZIP _____

PRIMARY PHONE _____ SECONDARY PHONE _____

EMAIL ADDRESS _____@_____

SELECT ONE FROM THE FOLLOWING

SCO notes:

____ New - At RPCC - Is this your first time at RPCC using Benefits _____

____ Continuing - Enrolled at RPCC in the past three years using Benefits _____

____ Visiting - Attending RPCC while pursuing a degree at another school _____

(Written approval from parent school is required.)

STUDENT RESPONSIBILITIES

- 1. Notify the SCO when a class is added or dropped and when education benefits have expired.
Failure to do so can result in a debt to RPCC and/or to the VA
2. All active duty servicemen, veterans, and retirees are required by the VA to order an official copy of a Military Transcript to be sent to the college.

** Note: A GPA below 2.0 may affect your education benefits, waivers or exemptions.

Student's Signature _____ Today's Date _____

PLEASE CHECK ONE OR MORE OF THE BENEFITS YOUR ARE USING

- _____ Chapter 30 - Montgomery GI Bill
- _____ Chapter 31 - VA Vocational Rehabilitation & Training
- _____ Chapter 33 - Post 9/11 GI Bill (Certificate of Eligibility Required)
- _____ Chapter 35 - DEA Dependent's Education Assistance Program
- _____ Chapter 1606 - Reserve GI Bill
- _____ Chapter 1607 - REAP Reserve GI Bill
- _____ LA VA Title 29 Tuition and Fees Exemption (Original Certificate Required)
- _____ Louisiana National Guard Waiver

THINGS TO KNOW

**All classes MUST be in your program of study

**Retaking courses for a better grade is prohibited when using the GI Bill

Degree of Study _____ Concentration _____

ENROLLMENT FOR TERM

Course Info: Course Name, Campus, Zip Code*	Initials

*Include zip code for any intern/externships taken.

DEVELOPMENTAL COURSEWORK MUST BE TAKEN ON THE PHYSICAL CAMPUS

Developmental Courses Enrolled	Initials

Advisor Comments: _____

The classes listed above are required for completion of the student's program of study as specified in the current academic catalog for RPCC, to the best of my knowledge.

Academic Advisor's Signature _____ **Date** _____