

Registrar's Office

P: 603-230-4014

F: 603-230-9314

E: NHTIRegistrar@ccsnh.edu

Military Student Semester Certification Worksheet

This form must be completed prior to the start of each semester you want your enrollment certified. Return the completed form to: NHTIVeteranInfo@ccsnh.edu.

Note: Dropping a class beyond the refund period will create a debt on your student account. Military education monies will be returned to the VA and/or DOD as required by law. You will become responsible for paying NHTI for the returned funds. A HOLD will be placed on your NHTI student account until the balance has been resolved. This will affect registering for any additional classes.

Student's Name: _____	Student's ID#: A_____
Academic Major: _____	DOB: _____
Telephone/Cell#: _____	Email: _____
Street Address: _____	Apt. #: _____
City: _____	State: _____ Zip: _____

Select one:

Please certify me for the (check one) :	Fall	Spring	Summer	Year:
<u>NOT Using</u> military benefits for (check one) :	Fall	Spring	Summer	Year:

Please indicate which military education benefit you will be using:

- Chapter 30** – Montgomery GI Bill (prior active duty)
- Chapter 31** – VRE - Veteran Readiness & Employment
- Chapter 33** – Post 9/11 Veteran
- Chapter 33T** – Post 9/11 Dependent
- Chapter 35** - VA Dependent
- Chapter 1606** – Montgomery GI Bill (Reserves/National Guard/MO Guard)
- Tuition Assistance** – NH National Guard Army
- Tuition Waiver** – NH National Guard **(check one)**: Army Air
- Other:**

By signing this form, you allow the release of grades or any other information required by the Department of Veteran Affairs, National Guard, DOD or other funding agency.

Signature: _____ Date: _____