



INITIAL DISCLOSURES FOR CERTIFICATION OF VETERANS BENEFITS

Please complete this form and return it with required documents to the Hood Seminary Registrar Nancy Baker, 1810 Lutheran Synod Drive, Salisbury, NC 28144 nbaker@hoodseminary.edu. You cannot be certified for benefits until all required documents are received and evaluated. **Certifications will be completed after the end of the drop/add period.**

NAME _____ VA FILE# _____

SOCIAL SECURITY# _____

ADDRESS _____ DAYTIME PHONE# _____

E-MAIL ADDRESS _____

PROGRAM (if MTS indicate concentration) _____

Are you currently Active Duty? ___ Yes ___ No

_____ (If you're not sure of your eligibility, contact the VA at
Chapter # (30, 33, 35, 1606, 1607, Voc Rehab) 1-888-442-4551)

1. Have you received VA educational benefits at another college? ___ Yes ___ No (If yes, you must submit a VA form 22-1955 (veterans) or 22-5495 (dependents) and send a copy to Nancy Baker at Hood. Download at http://www.va.gov/vaforms/search_action.asp?FormNo=&tkey=change+of+program&Action=Search)
2. Have you applied for VA educational benefits ___ Yes ___ No (If no, you must complete a VA application on-line: <http://vabenefits.vba.va.gov/vonapp/main.asp>)

In addition to the first two steps the following forms must be submitted to Nancy Baker, Registrar, before benefits can be certified: (If you have previously submitted this information please indicate by the requested item.)

- _____ A copy of your DD 214 (Certificate of Release or Discharge) or NOBE (guard/reserve)
- _____ A copy of the 22-1955 from veteran or 22-5495 dependents (if you used benefits in the past)
- _____ A copy of your Certificate of Eligibility
- _____ A copy of your VONAPP Confirmation Page
- _____ A completed Registration Form for classes

Admissions requirements must be met before benefits can be certified.

- _____ You must complete an application for admission and be accepted by Hood Theological Seminary.
- _____ You must submit official transcripts from **ALL** colleges attended and the transcript(s) must be evaluated.

Please list ALL colleges attended and request transcripts to be sent to the Registrar.

(Please continue on the reverse side.)

Student Responsibilities

Please read and initial each item:

_____ I understand that I cannot receive education benefits for courses that are not required for my degree program.

_____ I understand my conduct is monitored and will be reported to the VA if I am suspended or dismissed because of unsatisfactory conduct.

_____ I understand that I must report **immediately** to the Registrar any changes to my address or degree program and any deployment.

_____ I understand that I must register for courses each semester/term before I can be certified for benefits.

_____ I understand that the VA will hold me responsible for any overpayment of my educational benefits.

Student's Signature _____

Date _____