VETERANS REGISTRATION CERTIFICATION FORM
REQUEST TO CERTIFY ENROLLMENT WITH THE VA

PLEASE COMPLETE AND SUBMIT THIS FORM EVERY TIME YOU REGISTER AND CHOOSE TO USE YOUR VA EDUCATION BENEFITS. A NEW FORM MUST BE COMPLETED AND SUBMITTED WITH EACH DROP AND ADD TRANSACTION.

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<thead>
<tr>
<th>VA FILE #/Last 4 Digits of SSN</th>
<th>CHAPTER: PLEASE CIRCLE</th>
<th>1606</th>
<th>1607</th>
<th>EAP</th>
<th>TA/FTA</th>
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IS THIS YOUR FIRST TIME USING YOUR VA EDUCATION BENEFITS AT CCP? _____YES _____NO

IF YES, PLEASE PROVIDE CERTIFICATE OF ELIGIBILITY

DO YOU HAVE COLLEGE CREDITS FROM ANOTHER INSTITUTION? _____YES _____NO

IF YES, PROVIDE A COPY(S) OF OFFICIAL TRANSCRIPT FOR EVALUATION

ARE YOU A GUEST STUDENT? _____YES _____NO

IF YES, LIST PRIMARY SCHOOL (Please attach approval letter from Primary School)

*TERM AND YEAR

☐ FALL 20___  ☐ WINTER 20___  ☐ SPRING 20___  ☐ EARLY SUMMER 20___  ☐ LATE SUMMER 20___

MAJOR OR PROGRAM OF STUDY

NUMBER OF CREDITS FOR THIS ENROLLMENT

Disclaimer: You are ultimately responsible for all Community College of Philadelphia program tuition and fees. If you are unsure of your benefits you may contact your local VA office, or contact Veterans Affairs at 1-888-442-4551 (1-888-GR-BILL-1).

YOUR SIGNATURE IS REQUIRED TO PROCESS YOUR REQUEST:

______________________________________  __________________________
SIGNATURE  DATE

PLEASE ALLOW TWO TO FOUR WEEKS FOR PROCESSING. CHECK MyCCP ENROLLMENT PROFILE FOR UPDATES

COMPLETE, SIGN, AND RETURN FORM
OFFICE OF STUDENT RECORDS AND REGISTRATION
ATTN: SCHOOL CERTIFYING OFFICIAL
FAX: (215) 751-8001 OR EMAIL: RECORDS@CCP.EDU

Revised November 2014