

Campbellsville University
Veteran's Education Benefits Tracking Form 2023-2024

Today's Date: _____ Semester to begin coursework: _____

Full Name of Student: _____

Birthdate: _____ SSN: _____ CU ID#: _____

E-mail Address: _____

Home Address: _____

Phone # Primary: _____ Secondary: _____

Were benefits transferred to you? NO YES

If yes, from? _____ Relation to you: _____

VA Chapter: ____CH 33-Post 9/11 GI Bill® ____ Yellow Ribbon ____CH 30-Montgomery Bill
____CH 31-Vocational Rehab ____CH 1607-Army Reserve
____CH 1606-Montgomery GI Bill® Selected Reserves
____CH 35-Survivors & Dependents VA File# _____ Payee# _____
____FRY

Have you used benefits in the past? NO YES If yes, where? _____

Colleges Attended: _____

Degree Seeking: Major: _____ Minor: _____

____ I acknowledge that I am responsible for notifying the Registrar's Office of any change in course schedule, program (major/minor), or contact information.

____ I also understand that as a current student receiving VA education benefits at Campbellsville University, the Registrar's Office will release needed information and/or documentation to the Veterans Administration. This includes and is not limited to class schedules, unofficial transcripts, billing information and also non-punitive grades. Former students must submit a signed request to release any records to VA.

____ I also acknowledge that the SCO, School Certifying Official, will be contacting my professors for information regarding non-punitive grades. I hereby give permission for the release of that information.

Signature: _____ Date: _____

Registrar's Office

1 University Drive

PO 789

Campbellsville, KY 42718

Phone: 270.789.5442 Fax: 270.789.5362

SCO obcheatham@campbellsville.edu

"GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S. government Web site at <https://www.benefits.va.gov/gibill>."