

Phone: 215.895.1600 Fax: 215.895.2939 Email via ask.drexel.edu drexel.edu/drexelcentral

## **Veterans' Benefits Certification Form**

Personal Information	
Student's Name	University ID
Drexel Email	SSN
Street Address	
City State ZIP	Phone
Academic Information	
Grade Level:UndergraduateGraduate	
Academic Year:2024-20252025-2026	
College/Major	
Military Affiliation (Select One)	
Active Duty Veteran Spouse of Active Duty Service Membe	er Spouse of Veteran
Dependent of Active Duty Member/Veteran	
VA Chapter (Select One)	
Chapter 30 — Active Duty Chapter 1606 — Selected Reserves Chapter 31 — Vocational Rehabilitation Counselor*	
Chapter 33 — Post 9/11 GI Bill** Chapter 35 — Survivors & Dependents Assistance***	
Chapter 33 — Yellow Ribbon (Must have 100 percent eligibility under Post-9/11 GI Bill)	
Please provide the additional information below	
*Chapter 31 — Please provide counselor's email address	
**Chapter 33 (Percentage) — Please provide eligibility percentage	
***Chapter 35 — Please provide the Social Security number and the first and last name of the veteran you are receiving benefits from	
Signature	
By signing below, you are certifying that:	
<ul> <li>The credits you register for count towards the degree requirements of your program.</li> <li>You discussed with the Office of Admissions at the time of your admission to Drexel University the possibility that you may have credits from a prior institution that have been transferred to Drexel and will be applied towards your degree program requirements.</li> </ul>	
You understand that upon exhaustion of your VA Benefits, you are solely responsible for paying any balance due to Drexel.	
Signature	Date

GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by the VA is available on the official U.S. Government website at **benefits.va.gov/gibill**.