



I, _____, understand that as a VA Educational Benefit recipient, I am responsible for the following procedures to maintain my VA Educational benefits:

_____ **Be aware that credit hours and training periods can affect your housing allowance.**

_____ **Contact the VA if you are enrolled in a program that has non-standard training.**

_____ **Report any changes to schedules including:**

- **dropping or adding classes**
- **withdrawal from ASU Mid-South**
- **changing or adding degree programs**
- **changing from online/hybrid to residential classes**
- **change of address**

_____ **I acknowledge that my enrollment will not be certified to the VA until I have met with the Certifying Official to complete the necessary steps to submit credit hour certification.**

_____ **I understand all classes I wish to pursue must apply to my degree plan to receive full VA Educational benefits. Any classes I take outside my degree plan will be my financial responsibility.**

Veteran/Dependent Signature: _____

Date: _____

Student ID Number: _____