



ST. JOHNS RIVER COMMUNITY COLLEGE
FLORIDA SCHOOL OF THE ARTS
 CLAY, PUTNAM AND ST. JOHNS COUNTIES COOPERATING

FINANCIAL AID OFFICE
 5001 ST. JOHNS AVENUE
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 SUNCOM: 890-4200

283 COLLEGE DRIVE
 ORANGE PARK, FLORIDA 32065-7650
 PHONE: (904) 276-6800

2990 COLLEGE DRIVE
 ST. AUGUSTINE, FLORIDA 32095-1197
 PHONE: (904) 808-7400

SJRCC DVA CERTIFICATION REQUEST

This form must be completed with each term's registration. Failure to submit this form will delay your certification to receive benefits.

NAME: _____ **Student ID Number** _____

ADDRESS: _____

_____ **CITY** _____ **STATE** _____ **ZIP** _____

TELEPHONE: _____ **VA BENEFITS CHAPTER:** _____

STUDENT STATUS: NEW _____ RETURNING _____
 NEW TRANSFER _____ RETURNING AFTER ABSENCE _____

REQUEST IS FOR: FALL _____ SUMMER A _____
 SPRING _____ SUMMER B _____ YEAR _____

1. I am seeking an A.S. degree in _____ or an A.A. degree. Major: _____

2. I understand that to qualify for certification, the courses I take **must** be either (a) required for my SJRCC degree, or (b) if elective, not in excess of the number of elective hours needed for my SJRCC degree. I understand that an audit will be made after the ADD/DROP period and if I registered for a non-applicable course, the VA will be notified and my enrollment status changed accordingly.

3. I have received and read a copy of the policies and procedures on VA educational benefits at SJRCC and I am aware that additional information is in the college catalog.

4. I am registering for the following courses:

NAME OF COURSE	CREDIT HRS	REPEAT= X

5. I am requesting a deferment of fees: YES _____* NO _____

****NOTE: You must complete a separate SJRCC Veteran Deferment Approval Form to receive a deferment.** You may be eligible for a 60-day deferment of tuition if you meet both of these conditions: (a) you are not now receiving DVA checks, and (b) you have not had a previous deferment during the current school year. **Deferments must be paid when due, even if you have not received your first check.**

I AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

STUDENT SIGNATURE : _____ **DATE:** _____

Revised 06/08