

## Mississippi University For Women Verification of VA Enrollment

1. This form MUST be completed at the beginning of each enrollment period (**FALL, SPRING, SUMMER**) by students who wish to receive Veteran's benefits.
2. VA will only pay for courses that apply towards your degree plan.

**NAME:** \_\_\_\_\_ **ADDRESS:** \_\_\_\_\_

**MUW ID:** \_\_\_\_\_

**TERM/YEAR:** \_\_\_\_\_ **DEGREE PROGRAM:** \_\_\_\_\_

**BRANCH OF SERVICE:** \_\_\_\_\_ **VA BENEFIT AWARDED:** \_\_\_\_\_

**HAVE YOU ATTENDED MUW BEFORE?** \_\_\_\_\_

**HAVE YOU ATTENDED ANOTHER INSITUTION SINCE YOUR LAST TERM AT MUW, OR ARE YOU A TRANSFER STUDENT FROM ANOTHER INSTITUTION?** \_\_\_\_\_

**TOTAL NUMBER OF CREDIT HOURS FOR THIS TERM:** \_\_\_\_\_

### SCHEDULE OF ENROLLMENT *(Note if any courses are electives.)*

SYMBOL	NUMBER	SECTION	COURSE TITLE	<i>Required</i>	CREDIT HOURS	YES	NO

**ADVISOR SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

\_\_\_\_\_ I certify that a minimum of **12** semester hours for the period apply toward degree requirements.

**STUDENT SIGNATURE:** \_\_\_\_\_