

2024-2025 **VETERANS EDUCATIONAL BENEFITS ENROLLMENT FORM**

This form is required each semester you attend.

IF YES, what is your new program of study?

Questions about how to complete this form? Call 217-786-2237 or 800-727-4161.

Text 217-786-2237. www.llcc.edu/financial-aid Return completed form to: LLCC Financial Aid

5250 Shepherd Road Springfield, IL 62703

financial.aid@llcc.edu Electronic forms only accepted from LLCC email addresses.

Student Information	·		217-786-2229 fax	
STUDENT NAME (LAST, FIRST, MIDE	DLE INITIAL)		SSN OR STUDENT ID	
ADDRESS				
CITY		STATE	ZIP	
PHONE NUMBER (INCLUDE AREA C	ODE)			
EMAIL ADDRESS				
VA APPROVED PROGRAM OF STUD	Υ			
Compository Attack discord	Diagram and a stance was for			
Summer 2024	Please only select one per for Fall 2024	Spring 2025		
Benefits				
Are you CURRENTLY in default on any student loans?		I confirm the Illinois address listed above is correct.		
Yes No		Yes No		
Initial the federal benefit v	which you are using (ask if unsure):		
Montgomery (Ch. 30) - Active		Post 9/11 (Ch. 33)		
Montgomery (Ch. 1606) - Guard/Reserve		Post 9/11 Transfer of Entitlement (Ch. 33)		
Survivor/Dependent (Ch. 35)		Vocational Rehab (Ch. 31)		
How will you be paying fo	r this semester's tuition?			
Illinois Veterans Grant		Payment through financial aid		
MIA/POW Grant		Illinois National Guard Grant		
Payment through registration Payment through TouchNet		Chapter 33		
If you selected Chapter 33	-Post 9/11, answer the following	questions:		
How many months of e	ligibility are remaining?			
Percentage of benefit e	ntitlements:			
Have you changed your ap	oproved program of study?			
Yes No				

Schedule appointment with a student success coach (217-786-2224)				
Bring this form to the appointment. The student success coach will provide comments in this section, including course schedule and if any courses are not part of the student's program:				
Repeat class(es) (if any):				
Veteran Statement				
By submitting this form:				
. I certify that all of the courses for which I register each term will be required to complete my degree/certificate requirements in my designated program of study (i.e., the program reported to the U.S. Dept. of Veterans Affairs).				
2. I understand that I must submit academic transcripts for each college, university and/or trade school I have previously attended and that my service record must be evaluated for possible credits. Transcripts must be submitted to the Lincoln Land Community College Records office prior to second semester of enrollment.				
3. I understand that coursework not approved for VA benefits and/or required in my program of study c in training time.	annot be included			
4. I understand that the VA does not pay for any developmental online courses.				
5. I agree to notify the LLCC Veterans Affairs office if I add, drop or withdraw from any class(es).				
6. I agree to notify the LLCC Records and LLCC Veterans Affairs of any change to my program of study (a concentration).	cademic			
7. I understand that I must meet the academic standards of the college and for VA as indicated in the LL	CC catalog.			
8. I understand that if I default on my student loans at any time I will no longer be eligible to use any Sta Veterans benefits.	ate of Illinois			
9. I understand that any later starting classes will be billed after that course drop date (i.e., Mod. 1, Mod.	2).			
10. As a veteran, I understand I may be eligible to apply for the LLCC Brian McMillen Veterans Scholarship).			
11. I understand all of the student success coach's comments, if any, and agree to the schedule as indicat	ed.			
I certify this information is true and will verify the accuracy of this information if needed. I understand the false or misleading information, I risk losing the ability to receive financial aid at LLCC.	at if I purposely give			
STUDENT VETERAN SIGNATURE (REQUIRED – During meeting with student success coach)	DATE			
STUDENT USING TRANSFER BENEFITS SIGNATURE (REQUIRED – During meeting with student success coach)	DATE			
STUDENT SUCCESS COACH SIGNATURE (REQUIRED – During meeting with student)	DATE			

After form has been signed by the student and student success coach, return to financial aid office.