

Benefits process for:

Active Duty, Montgomery GIB, Post 9-11 GIB, 1606, 1607, Survivors & Dependents of Disabled Veterans

- Veteran apply for VA Educational Benefits online at www.gibill.va.gov/
- Veteran apply for Admission at School, and fully complete application process
<https://umwestern.edu.185r.net/application/login/?S=%2Fapplication%2Findex.php>
- Print Copy of Application with confirmation and submit to VA Certifying Official at School
Jennifer Fox at Montana Western, 710 South Atlantic Dillon, MT 59725, 406-683-7511 or Via
FAX: 406-683-7510
- Receive Certificate of Eligibility from VA (takes 4-12 weeks) and submit to VA Certifying Official
at School (see above contact info.)
- Register for classes
- Fill out the Veterans Educational Benefits Request Form below and return to the VA Certifying
Official
 - Attach an unofficial copy of the Veteran's or Custodial Veteran's Form DD214
- Sign appropriate deferred payment plan with Business Services, 406-683-7101

THE UNIVERSITY *of* MONTANA WESTERN

Veterans Educational Benefits Request Form 2016-2017

Financial Aid Office
710 S. Atlantic St
Dillon, MT 59725

Phone: 406-683-7511 Fax: 406-683-7510

Please complete each year you wish to receive benefits and mail or fax to the financial aid office

VA certifying official prefers to have your certificate of eligibility on file to certify enrollment

Personal Information

Student ID _____

VA File Number (Usually SSN of veteran) _____

Name (Last, First MI) _____

Address _____

City _____ State _____ Zip Code _____

Daytime Phone Number _____

UMW Email _____

Degree Information

Degree Program (Select One)

- Certificate
- Associates
- Bachelors

Term Benefits are requested for

- Summer 2016
- Fall 2016
- Spring 2017

Are you receiving benefits under the Post 9-11 GI Bill?

- Yes
- No
- I don't know

Which best describes you?

- Veteran
- Active Duty Military
- National Guard/Reservist
- Dependent/Spouse of Veteran

Current Program of Study?

Have you recently changed your major?

- Yes
- No

By Signing Below I authorize the release of my academic, disciplinary, and financial records to the US Department of Veteran's Affairs.

Signature: _____ Date: _____