

Benefits process for:

VA Vocational Rehabilitation

- Apply for Veterans Vocational Rehabilitation Benefits
- Work with VA Vocational Rehabilitation Counselor to create an education plan
- Obtain an Authorization for the school (usually sent from Voc. Rehab. Directly to school)
- Veteran apply for Admission at School, and fully complete application process
<https://umwestern.edu.185r.net/application/login/?S=%2Fapplication%2Findex.php>
- Register for classes
- Fill out the Veterans Educational Benefits Request Form below and return to the VA Certifying Official Jennifer Fox at Montana Western, 710 S. Atlantic St. Dillon, MT 59725 406-683-7511 or via FAX: 406-683-7510
- Contact Business Services to arrange for a Third Party Pay Agreement, 406-683-7101
- Obtain Bookstore Authorization from Business Services for books and supplies, if authorized
- Monitor account and submit grades to Vocational Rehabilitation at end of term.

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: _____