

## Veteran's Initial Request to use Benefits

NAME:		SSN:	
Westmoreland ID #:		Phone:	
SERVICE BR	ANCH:		
CHAPTER:	30 (Active Duty)	<b>33</b> (Post 911)	
	31 (VA Readiness & Employment)	<b>1607</b> (REAP)	
	<b>35</b> (Dependent of a Veteran)	1606 (Reserve/Nat'l Guard)	
	icial transcripts from all previous colleges and mi Registrar's Office or transcripts@westmoreland.ed		
	cker Program documentation (if applicable).		
Notice of B	asic Eligibility (NOBE) if you are in the Reserves		
is made). Prior t		nal VA office once a determination on your eligibility he screen showing your eligibility as listed from on	

Copy of Veteran's Request for Certification (fillable form on our website under financial aid)

CURRENT MAJOR: \_\_\_\_\_

for office use

VETS\_\_\_\_\_

STUD TYPE\_\_\_\_\_ VA-EM\_\_\_\_\_