



Veterans Services Office
1 College Drive
East Peoria, IL 61635-0001

Phone: (309) 694-5562
Fax: (309) 694-5769
email: veterans@icc.edu

REQUEST FOR CERTIFICATION

Name: _____
Last First MI

Student ID #: _____ Phone Number: _____

TERM TO CERTIFY:

[] Fall 20__ __ [] Spring 20__ __ [] Summer 20__ __

BENEFIT(S) YOU WISH TO UTILIZE THIS TERM:

Federal Benefits

- [] Chapter 33 (Post 9/11)
[] Chapter 35 (Survivors and Dependents Educational Assistance)
[] Chapter 30 (Montgomery GI Bill)
[] Chapter 1606 (Selected Reserve)
[] Chapter 31 (Veteran Readiness and Employment)

State Benefits

- [] Illinois Veterans Grant
[] Illinois National Guard Grant
[] Illinois MIA/POW Award

BY SIGNING THIS FORM, YOU ACKNOWLEDGE THAT YOU HAVE READ AND UNDERSTAND THE FOLLOWING:

- 1. THIS FORM MUST BE COMPLETED EVERY TERM! Register early and submit this form to Veterans Services in advance of the upcoming term to ensure you receive your benefits on time.
2. Those seeking to utilize federal VA benefits must be taking courses that count towards their degree program.
3. VA benefits will not cover any remedial coursework taken in an online/distance format. All remedial coursework must be taken in-person.
4. Students using benefits must maintain a 2.0 cumulative GPA and complete 67% of the courses they attempt or risk losing their benefits.
5. Before dropping or withdrawing from any course, contact Veterans Services to discuss how it may affect your funding or create a debt to the VA or ICC. As the student, you will be held accountable for debt caused by changes in your course schedule.
6. Chapter 33 recipients must pursue greater than half time to qualify for a housing stipend. Any pursuit below full time will result in a prorated housing allowance, based on the rate of pursuit.
7. It is your responsibility to know what charges (if any) that your benefits will cover. Any outstanding balance is your responsibility and you may not be able to enroll in future semesters until that balance is paid. Past due balances may be sent to collections.
8. We process what you request. Make sure you have selected exactly which benefit(s) you wish to use. If this form is not filled out completely and/or correctly, you will be contacted via your ICC email and it will not be processed until corrected.
* IMPORTANT: I understand my responsibility to notify Veterans Services of any changes in address, academic program, dropped or added classes, or complete withdrawals. I UNDERSTAND that dropping a class or receiving a grade of "W" can result in reduced payment from the VA and the student will be held responsible for any overpayment of benefits and/or outstanding charges/balances to ICC.

Signature _____

Date _____