



# Student Financial Services

## VA Educational Agreement Form

Name: \_\_\_\_\_ Student ID: A \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

I am applying for the following educational benefits:

- |   |   |                                       |
|---|---|---------------------------------------|
| <input type="checkbox"/> Chapter 30       | <input type="checkbox"/> Chapter 31         | <input type="checkbox"/> Chapter 33   |
| <input type="checkbox"/> Chapter 33 - TOE | <input type="checkbox"/> Chapter 35         | <input type="checkbox"/> Chapter 1606 |
| <input type="checkbox"/> Hazlewood Act    | <input type="checkbox"/> Tuition Assistance | <input type="checkbox"/> MyCAA        |

Please read and **initial** each line to acknowledge that you have read and agree to each statement:

- \_\_\_\_\_ I understand that it is my responsibility to read and understand the information covered in the Student Benefits and Responsibilities Info Packet (see link below).
  - \_\_\_\_\_ It will take approximately 2-4 weeks from the first-class day for my VA Educational Benefits to be received.
  - \_\_\_\_\_ I understand that if my application is incomplete and/or missing documents my VA Educational Benefits may be further delayed.
  - \_\_\_\_\_ I understand that I am responsible for checking my JAGNET account to view my College Financing Plan and any messages related to my VA Educational Benefits.
  - \_\_\_\_\_ I understand that my certification will be processed prior to the first-class day.
  - \_\_\_\_\_ I understand that it is my responsibility to complete a save list form every semester.
  - \_\_\_\_\_ I understand that I am responsible for notifying my VA Certifying Official of any changes to my schedule or major.
  - \_\_\_\_\_ I understand I am responsible for paying back any debt to the VA and/or college created by changing my schedule.
  - \_\_\_\_\_ I understand that any schedule changes will delay my VA Educational Benefits and if I accrue a balance, Business Office will place a hold on my account. Holds will be released once payment is received by VA.
  - \_\_\_\_\_ I understand that upon graduation from STC I must notify my VA Certifying Official.
  - \_\_\_\_\_ I understand that I must submit official Military and institutional transcripts to South Texas College Office of Admissions.
  - \_\_\_\_\_ I understand that I must submit official or unofficial Military and institutional transcripts to South Texas College Student Financial Services.
- College(s) previously attended: \_\_\_\_\_

**If at any time I fail to comply, my certification will be terminated and I will not receive my VA Educational Benefits. It is also my responsibility to contact Student Financial Services for any questions regarding my VA Educational Benefits paperwork.**

Signature \_\_\_\_\_

Date \_\_\_\_\_



**South Texas College  
Veterans Affairs Website**  
[www.southtexascollege.edu/veterans/](http://www.southtexascollege.edu/veterans/)



**Student Benefits & Responsibilities  
Information Packet**  
[www.southtexascollege.edu/veterans/pdf/Benefits-and-Responsibilities-Info-Packet.pdf](http://www.southtexascollege.edu/veterans/pdf/Benefits-and-Responsibilities-Info-Packet.pdf)

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