



COMMUNITY COLLEGE  
OF RHODE ISLAND  
Office of Enrollment Services

**Student Veteran's Certification Worksheet**

Please print clearly. The information listed on this form will be used to certify your enrollment for the semester indicated below.

\_\_\_\_\_  
Name

\_\_\_\_\_  
VA File Number

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
CCRI ID #

**Eligibility Status - Please check your current status (select one only):**

- CH30** Veteran/Active Duty     
  **CH31** Voc Rehab     
  **CH35** Veteran's Spouse/Dependent     
  **CH1606** National Guard/Reserves     
  **CH1607** REAP  
 **CH33** Post-9/11 GI Bill     
 Please indicate percentage of entitlement the VA approved for CH33 \_\_\_\_\_%.  
 For CH33 are you a Veteran's Spouse/Dependent     Yes     No

**Mailing Address:** *It is your responsibility to inform the college and the VA of any address change.*

\_\_\_\_\_  
Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
CCRI e-mail \_\_\_\_\_@ccri.edu

**Certification Semester (a separate worksheet must be submitted for each semester)**

**Select campus attending:**  
 Knight     Flanagan     Liston     Newport

**Please check current semester:**  
 I wish to be certified for the Fall semester       Year \_\_\_\_\_  
 I wish to be certified for the Spring semester       Year \_\_\_\_\_  
 I wish to be certified for the Summer semester       Year \_\_\_\_\_

**Important Information:**

- ❖ Please be advised the Department of Veterans Affairs (VA) will only compensate for courses that apply to a student's certificate or degree program. Student's who meet with an academic advisor to select courses, should inform the advisor they are receiving VA benefits.
- ❖ The CCRI Certifying Officials will not certify students for courses that are not part of their program.
- ❖ Certificate of Eligibility (COE) - CCRI requires an up-to-date COE be submitted to the Office of Enrollment Services. Please refer to the Enrollment Services VA website for "How to Obtain Your Certificate of Eligibility via the VA website".
- ❖ For additional information regarding the Certification Process visit <http://www.ccri.edu/oes/veterans/>

**Please sign: I attest the information above is true and accurate. I understand that I am responsible for any unpaid balance that the VA does not cover.**

Name: \_\_\_\_\_

Date: \_\_\_\_\_