

**VA EDUCATIONAL BENEFITS  
DECLARATION OF INTENT  
FOR  
NEWLY ADMITTED STUDENTS**

Complete this form to indicate your intent to be certified for receipt of VA Educational Benefits.

- Failure to complete each item will prevent you from receiving benefits for the requested semester.
- This form must be completed each semester accompanied by a copy of your and tuition bill.

**Student Information**

Name: \_\_\_\_\_  
Last First MI

Student ID#: \_\_\_\_\_

Term/Year: \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Year

Student Health: \*OPT OUT: YES \_\_\_\_\_ NO \_\_\_\_\_

**\* All full-time students are required to have health care coverage (click on link for further information: <http://www.umaryland.edu/studenthealth/waiving-student-health-coverage/>).**

**This fee will automatically be added to your certification, unless you check above that you would like to opt out of the coverage, (“Opting Out” of the coverage with our office, does not preclude you from following requirements noted in the healthcare coverage link above).**

Address: \_\_\_\_\_  
Street

City State Zip

DOB:                    /        /  
MM    DD    YY

Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Indicate the type of benefit for which you are eligible:**

- \_\_\_ Chapter 30      Montgomery GI Bill-Active Duty
- \_\_\_ Chapter 31      Vocational Rehabilitation and Employment VetSuccess (VR&E VetSuccess)
- \_\_\_ Chapter 32      Veterans Educational Assistance Program (VEAP)
- \_\_\_ Chapter 33      Post-9/11 GI Bill
- \_\_\_ Chapter 35      Survivors & Dependents Educational Assistance (DEA)
- \_\_\_ Chapter 1606    Montgomery GI Bill – Selected Reserve Educational Assistance Program
- \_\_\_ Other            No Benefits Available

University of Maryland, Baltimore  
School of Social Work – MSW Program

If you have any questions, contact the Office of Records and Registration at:  
[sswveteransaffairs@ssw.umaryland.edu](mailto:sswveteransaffairs@ssw.umaryland.edu)

**Personal Responsibility For Receiving VA Educational Benefits**

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

**\*\*Read and initial beside each item\*\***

\_\_\_\_\_ You must pursue the course work as outlined in the SSW Academic Handbook -  
[https://www.ssw.umaryland.edu/media/ssw/students/handbooks/19-20\\_Student\\_Handbook-final.pdf](https://www.ssw.umaryland.edu/media/ssw/students/handbooks/19-20_Student_Handbook-final.pdf)

\_\_\_\_\_ Student must remain in good academic standing. Changes in student status, i.e. academic probation, failures, leave of absence, change in full-time status, etc. will be reported to the Veterans Administration.

\_\_\_\_\_ You must maintain satisfactory academic progress toward the educational objective stated on your VA application for benefits.

\_\_\_\_\_ The VA will not pay for repeated courses unless the particular course is a graduation requirement and was not passed on the first attempt.

\_\_\_\_\_ The VA does not pay for audited courses.

**Attestation**

I have read the above and I understand my personal responsibilities in claiming VA benefits. I realize that the University of Maryland School of Social Work is responsible for communicating accurate enrollment data to the Veterans Administration and that any failure on our part to comply with the above conditions jeopardizes our continued receipt of VA educational benefits.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Submit completed form with a copy of your Certificate of Eligibility and tuition bill to:**

University of Maryland School of Social Work  
Office of Records and Registration  
Attn: Phyllis Pope or Danielle White  
525 W. Redwood Street  
Room 105  
Baltimore, MD 21201  
[sswveteransaffairs@ssw.umaryland.edu](mailto:sswveteransaffairs@ssw.umaryland.edu)  
(410) 706-6102