# Veterans Information Sheet

**Office of Veterans Affairs**
14 Fairchild Hall
Manhattan, KS 66506 – 1110
veteran@k-state.edu
www.k-state.edu/veteran

Office: 785-532-7061
Fax: 785-532-7628

K·STATE
Kansas State University

CAMPUS: Manhattan _____ Salina _____ Other _____ TERM: Fall _____ Spring _____ Summer _____
On-line _____ Distance Learning _____

**FAILURE TO COMPLETE THIS FORM EACH TERM WILL TERMINATE YOUR BENEFITS WITH THE ENDING DATE OF THE LAST TERM**

Name _____
(First) (M.I.) (Last)

Soc. Sec. No. _____

VA "C" No. _____
(Required for dependents eligible for VA benefits)

Current mailing address: _____

Date of Birth: _____

Degree: Assoc. ____: Bach. ____: MS ____: Ph.D. ____: DVM ____

Curriculum or major _____

VA chapter 30 ___ 31 ___ 32 ___ 35 ___ 1606 ___ REAP 1607 ___ 903 ___ 901 ___ 33 ___ 33 Yellow ___

Home Phone No. _____ Work Phone No. _____

Have you previously attended or used your Veterans Educational Benefits at another post-secondary institution? Yes* ____ No ____

Did you change your major? ____ Yes ____ No

*If yes, you need to complete a Form 22-1995

Name _____ (M.I.) (FIRST) (LAST)

## Class Schedule

**Complete this section for all class sections**

| 5-Digit Reference number | Course name/number | Credit hour | Course title |
|---|---|---|---|
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**Office Use Only**
CURR _____
OV _____

| Enrollment Dates | Drop Date | Ck 33/33 Yellow |
|---|---|---|
| | | Tuition |
| | | Fees |
| | | TOTAL |
| | | Tuition |
| | | Fees |
| | | TOTAL |
| | | |
| | | Yellow Ribbon |
| | | Tuition |
| | | Fees |
| | | TOTAL |
| | | YR Amt |

Previously attended K-State classes and received Veterans Educational Benefits: Yes ____ No ____
Active duty military Yes ____ No ____
Enrollment Fees: $ _____ (Required for all active duty or less than 1/2 time)

Local Address: _____
(If different from above)

Local Phone #: _____

**Primary Institution (if other than K-State)**

_____
Name of school

_____
Street address

_____
City/State/Zip

**OFFICE USE ONLY**

Emp ID: _____
CHAPTER: _____
Transcripts
KSU: _____
Other: _____
Degree Track: _____
Prior Credit: _____
AWARD
Full: _____
Date of database update: _____

_____
Transmittal date:

**PLEASE READ AND SIGN**

A major must be declared when you have completed 60 hours for a Bachelor degree or 30 hours for an Associate degree.

ALL CLASSES UP TO FULL TIME MUST BE WITHIN YOUR DEGREE TRACK.

**YOU MUST BE ADMITTED TO K-STATE AND HAVE ACADEMIC TRANSCRIPTS MAILED TO THE K-STATE OFFICE OF ADMISSIONS FROM ALL POST-SECONDARY SCHOOLS ATTENDED. VA STOPS PAYMENTS AND MAY ASK FOR REPAYMENT OF BENEFITS RECEIVED IF PRIOR CREDIT IS NOT REPORTED BY THE SCHOOL YOU ARE ATTENDING.**

All the information on this form is true and complete to the best of my knowledge.

_____ (Date)

_____ Signature of student

## Office Use Only

| DATE | INITIALS | HOURS | DATE OF CHANGE |
|---|---|---|---|
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**Comments:**

**K-State notice of nondiscrimination**
Kansas State University is committed to nondiscrimination on the basis of race, color, ethnic or national origin, sex, sexual orientation, gender identity, religion, age, ancestry, disability, military status, veteran status, or other non-merit reasons, in admissions, educational programs or activities and employment, including employment of disabled veterans and veterans of the Vietnam Era, as required by applicable laws and regulations. Responsibility for coordination of compliance efforts and receipt of inquiries concerning Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and the Americans With Disabilities Act of 1990, has been delegated to the Director of Affirmative Action, Kansas State University, 214 Anderson Hall, Manhattan, KS 66506-0124, (Phone) 785-532-6220; (TTY) 785-532-4807.

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