Department of Veter	ans Affairs	APPLIC	ATION F	OR VA	EDUCATION BEI	NEFITS
		PART I-AP	PLICAN	Γ		
NOTE: PLEASE TYPE OF	R PRINT CLEA	<b>RLY IN BLACK INK (</b>	or no. 2	PENCIL		
1. EDUCATION BENEFIT BEING APP	LIED FOR:					
A. Montgomery GI Bill - Acti	ve Duty Educatior	al Assistance Program (Ch	apter 30, Ti	tle 38 U.S.C	C.) (See Part I Instruction	ıS.)
B. VEAP/NON-CONTRIBUT Public Law 96-342) (See	ORY VEAP (Post Part I Instructions	-Vietnam Era Educational A s.)	ssistance P	rogram) (Cl	hapter 32, Title 38 U.S.C	.) (Section 903,
C. Montgomery GI Bill - Sele	ected Reserve Ed	ucational Assistance Progra	m (Chapter	1606 Title 1	10 U.S.C.) (See Part I Ins	structions.)
		ere (Erechtigten der eine Anterneter		1		
D. Unsure which education I 2. NAME OF APPLICANT (First, Middl		me (Explain why you think y 3. SEX	ou are eligit		8, Remarks.) DF BIRTH (Mo., Day, Year)	
2. NAME OF APPLICANT (FIRST, MIDDI	e, Lasi)			4. DATE C	JF BIRTH (100., Day, Year)	
5. MAILING ADDRESS (Number and s	treet or rural route of		FEMALE			
6. VA FILE NUMBER OR SOCIAL SEC	URITY NUMBER			7. TEL	EPHONE NUMBER (Includ	
			A. DAY		B. EVENING	ż
			( )			
8. DIRECT DEPOSIT INFORMA not be available for VEAP or (	Chapter 1606. Se	e Item 8 of Instructions.)	•	e the followi	ng information. (Cautior	i: Direct Deposit may
A. TYPE OF ACCOUNT (Check the type	be of account, if you	do not have an account check tl	he box)			
B. NAME OF FINANCIAL INSTITUTIO		NOT HAVE AN ACCOUNT INT NUMBER (OR ATTACH VC			D. ROUTING OR TRANSIT I	
B. NAME OF FINANCIAL INSTITUTION		INT NUMBER (OR ATTACH VC		r,) [	VOIDED CHECK)	NUMBER (OR ATTACH
9. PLEASE PROVIDE THE NAME, AD	 DRESS AND PHON	E NUMBER OF SOMEONE WH	IO WILL ALW	AYS KNOW	WHERE YOU CAN BE REA	CHED
10. HAVE YOU PREVIOUSLY APPLIE				/If "VES " list	and hanafit daimad Saa I	tom 10 of Instructions)
	D FOR DEPARTIME	ENT OF VETERANS AFFAIRS	DENEFIIS	(11 123, 1151	each benent claimed. See f	
11. HAVE YOU ALREADY RECEIVED	AN INFORMATION	PAMPHLET EXPLAINING EDU	JCATION BEI	NEFIIS? (Se	e Item 11 of Instructions)	
		PROGRAM OF EDU		-	NING	
A. SHOW THE NAME AND ADDRES	S OF YOUR SCHOO	DL OR TRAINING ESTABLISHN	IENT (If knowr	) )		
B. THE DATE YOU STARTED OR WI	L START TRAININ	G (If known)				
C. IF YOU KNOW YOUR EDUCATION	OR CAREER GOA	_, PLEASE SPECIFY				
D. EDUCATION OR TRAINING WILL E	SE BY:					
SCHOOL ATTENDANCE	_	ITICESHIP OR ON-THE-JOB T	RAINING			
		ONAL FLIGHT TRAINING				
	EXIS	FING STOCKS OF VA FORM 22	2-1990, MAR.	1997		(Continued on Reverse)
APR 1999 <b>22-1990</b>		BE USED.	, .,			

	13. ACTIVE	E DUTY SE	RVICE INFORMA	TION			
NOTE: If you are on active duty but in a military duties until the date of your disch					te that	you last performed	
A. ARE YOU NOW ON ACTIVE DUTY?							
B. ARE YOU NOW ON TERMINAL LEAVE JUST BEF	ORE DISCHARG	E?				YES NO	
						1 –	
C. ARE YOU ATTACHING A COPY OF YOUR DISCH see Instructions for these Items.)	HARGE PAPER?	(If "NO," comple	te Items 13D through 13F	and		YES NO	
					F		
D. DATE ENTERED ACTIVE DUTY	E. DATE SEPARATED FROM ACTIVE DUTY						
D. DATE ENTERED ACTIVE DOTT				F. BRANCH OF SERVICE			
14. CIVILIAN AND MILITARY EDUCATION (Co complete the requirements for a certificat	omplete Item 14	4A or 14B. Le	eave both blank if you	ı did not gradu	ate fron	n high school and did not	
A. DATE YOU GRADUATED FROM HIGH SCHOOL			B. DATE YOU COMPLET	ED THE REQUIR	EMENT	FOR A HIGH SCHOOL	
C. BELOW PLEASE SHOW ALL TRAINING AFTER H	IGH SCHOOL, INC	CLUDING ALL A	PPRENTICESHIP OR ON	I-THE-JOB TRAIN	NING (Se	ee Item14C of Instructions.)	
NAME AND LOCATION OF COLLEGE OR OTHER TRAINING PROVIDER (Include City and State)	DATES OF FROM	TRAINING TO	HOURS (Semester, Quarter, or Clock)	DEGREE, DIF OR CERTIFI RECEIVE	CATE	MAJOR FIELD OR COURSE OF STUDY	
				RECEIVE	.0		
D. WHAT FAA FLIGHT CERTIFICATES DO YOU HOI	LD?						
	15. N	ON-MILITA		l			
	PRINCIPAL C	OCCUPATION	NUMBER OF MONTHS IN THAT OCCUPATION			LICENSE OR RATING	
A. BEFORE ENTERING MILITARY SERVICE							
B. AFTER LEAVING MILITARY SERVICE							

16. ENTITLEMENT TO OTHER TYPES OF GOVERNMENT EDUCATIONAL ASSISTANCE	(See Instructions for Item 16)						
NOTE: If you check "YES," to any of these questions, provide full details in Item 18, REMARKS.	I						
A. IF YOU ARE ON ACTIVE DUTY OR IN THE SELECTED RESERVE, ARE YOU RECEIVING OR DO YOU EXPECT TO RECEIVE NON-VA EDUCATIONAL BENEFITS (SUCH AS TUITION ASSISTANCE) FROM THE ARMED FORCES OR THE PUBLIC HEALTH SERVICE FOR THE SAME PERIOD WHEN YOU EXPECT TO RECEIVE VA EDUCATIONAL ASSISTANCE?							
B. IF YOU ARE PARTICIPATING IN AN ROTC SCHOLARSHIP PROGRAM, DOES THAT PROGRAM PAY FOR YOUR TUITION, FEES, BOOKS AND SUPPLIES UNDER SECTION 2107, TITLE 10 U.S. CODE?							
C. IF YOU PARTICIPATED IN, OR ARE CURRENTLY PARTICIPATING IN, AN ROTC SCHOLARSHIP PROGRAM AND RECEIVED OF WILL RECEIVE AN OFFICER'S COMMISSION UPON COMPLETION OF THAT PROGRAM, SHOW THE DATE OF YOUR COMMISSION.	R Month Day Year						
D. IF YOU ARE A FEDERAL GOVERNMENT EMPLOYEE, DO YOU EXPECT TO RECEIVE EDUCATIONAL BENEFITS UNDER THE GOVERNMENT EMPLOYEES' TRAINING ACT FOR THE SAME TIME PERIOD WHEN YOU EXPECT TO RECEIVE VA EDUCATIONAL ASSISTANCE?							
17. MARITAL AND DEPENDENCY STATUS (See Instruction for Item	17)						
ONLY MONTGOMERY GI BILL VETERANS with military service (or delayed entry) before January 1, 1977 need to provide the following information:							
A. ARE YOU CURRENTLY MARRIED?							
B. DO YOU HAVE ANY CHILDREN WHO ARE:	YES NO						
(1) UNDER AGE 18? OR	YES NO						
(2) OVER 18 BUT UNDER AGE 23 AND ATTENDING SCHOOL?							
(3) OF ANY AGE PERMANENTLY HELPLESS FOR MENTAL OR PHYSICAL REASONS							
C. IS EITHER YOUR FATHER OR MOTHER DEPENDENT UPON YOU FOR SUPPORT?							
19. CERTIFICATION AND SIGNATURE OF APPLICANT							
I CERTIFY THAT all statements in my application are true and complete to the best of my knowledge ar	nd belief.						
PENALTY: Willfully false statement as to a material fact in a claim for education benefits is a punishable offense and may result in the forfeiture of these or other benefits and in criminal penalties.							
19A. SIGNATURE OF APPLICANT (D <u>O NOT PRINT)</u>	19B. DATE SIGNED						
SIGN HERE IN INK							
PART II - CERTIFICATION FOR PERSONS ON ACTIVE DUTY							
I CERTIFY THAT this individual is a member of the branch of the Armed Forces shown below and has consulted with me regarding his/her education program.							
20A. SIGNATURE, TITLE AND BRANCH OF SERVICE OF ARMED FORCES EDUCATION SERVICE OFFICER	20B. DATE SIGNED						

### INFORMATION AND INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR VA EDUCATION BENEFITS HOW TO USE THESE INSTRUCTIONS AND APPLY FOR BENEFITS

Tear off these instructions from the portion of the application form that you fill in. We suggest that you place these instructions next to the application form. This can assist you in referring to the instructions as you complete each item. After completing the fill-in portions of this application, see HOW TO FILE YOUR CLAIM at the end of these instructions for information on where to take or send your completed application form.

## SPECIFIC INSTRUCTIONS

#### NOTE: The numbers of the instructions in this section match the item numbers on the application.

**PART I.** Part I contains Items 1 through 19B. Complete Part I of this application to apply for VA education benefits under the following programs: (1) Montgomery GI Bill - Active Duty (chapter 30); (2) Veterans' Educational Assistance Program (chapter 32) (VEAP) and (3) Montgomery GI Bill - Selected Reserve (chapter 1606). DO NOT USE THIS FORM TO APPLY FOR VOCATIONAL REHABILITATION BENEFITS OR DEPENDENTS' EDUCATIONAL ASSISTANCE. Vocational Rehabilitation benefits, which are for veterans with a service-connected disability, and Dependents' Educational Assistance benefits, which are for spouses and children of veterans who are 100% disabled due to a service-connected disability, or who died from a service-connected disability, require different application forms. These application forms are available at your nearest VA regional office. These forms may also be available where you received this application.

**ITEM 1.** Check the block next to the education benefit you wish to apply for. You may use only one type of education benefit at a time.

**ITEM 1A.** You may be eligible for Montgomery GI Bill - Active Duty (Eligibility Based on Active Duty), also referred to as chapter 30, if you served on active duty and meet any one of the following conditions:

(1) You first entered service on or after July 1, 1985,

and

\_\_\_\_\_

you had your pay reduced by \$100 per month for 12 months during service for education purposes.

OR

(2) You entered service (or agreed to delayed entry) before January 1, 1977

and

you have educational assistance entitlement remaining under the Vietnam Era GI Bill.

OR

(3) You were voluntarily separated under the Voluntary Separation Incentive or Special Separation Benefit Program, and had your military pay reduced by \$1,200.

OR

(4) You were on active duty and eligible for VEAP benefits on October 9, 1996, elected MGIB benefits within one year from that date, and paid \$1,200 into the MGIB fund. See Item 11 Instructions for information on VA Pamphlet 22-90-2, Summary of Educational Assistance Under the Montgomery GI-Bill -Active Duty.

**ITEM 1B.** You may be eligible for VEAP/Non-Contributory VEAP if :

\* Your service began on or after January 1, 1977 through June 30, 1985,

and

\* you contributed to a VEAP account (unless your program was Noncontributory VEAP). These programs are also referred to as chapter 32 and Section 903.

See Item 11 INSTRUCTIONS for information on VA Pamphlet 22-79-1, Summary of Educational Benefits Under the Post-Vietnam Era Veterans' Educational Assistance Program.

**ITEM 1C.** You may be eligible for Montgomery GI Bill--Selected Reserve benefits if :

\* You are a member of the Selected Reserve or National Guard and meet the requirements, such as the length of your reserve commitment.

Attach a copy of your DD Form 2384, Notice of Basic Eligibility. This form is also called a "NOBE". Your reserve unit (for example, the Army Reserve or the Army National Guard) issues this notice to you at the time you become eligible for Montgomery GI Bill--Selected Reserve benefits. If you are unable to obtain your copy, request a duplicate from your Selected Reserve unit.

See Item 11 INSTRUCTIONS for information on VA Pamphlet 22-90-3, Summary of Educational Benefits Under the Montgomery GI Bill - Selected Reserve.

**ITEM 1D.** If you are unsure which benefit applies to you, check block 1D and explain in Item 18, REMARKS, why you think you are eligible.

ITEM 2. Show your name: first, middle initial, and last.

**ITEM 5.** Show your mailing address.

**ITEM 6.** Show your Social Security number unless you filed a previous VA claim of any kind and were assigned an 8-digit file number. If you were assigned an 8-digit file number, show both this number and your social security number.

**ITEM 8.** VA is required to make direct deposit to your financial institution unless direct deposit would cause you a hardship. If you wish direct deposit, the best method is to attach a voided personal check to your application.

Alternatively, you may provide information from either your checking or savings account. The routing or transit number is normally the left most 9 digit number at the bottom left side of a check. It has two bars (up and down) separating this number from the account number. The account number is the number just to the right of the routing number.

**Caution:** Not all VA computer systems can handle direct deposit at this time. We will let you know if your payments will go direct deposit. If direct deposit is not available, we will issue payment by check until such time as our computer systems are able to handle direct deposit.

**ITEM 9.** Please provide the name, address, and telephone number of someone who will always know where you can be reached. VA needs this information for administrative purposes.

**ITEM 10.** If you check "YES", list what benefit that you claimed. Possibilities include disability compensation or pension, vocational rehabilitation, home loan, or education benefits. If you filed for education benefits, possibilities are the Vietnam Era GI Bill (chapter 34), Dependents' Educational Assistance (chapter 35) and the programs shown in item 1. If you have previously applied for education benefits based on someone else's service (Dependents' Educational Assistance), show the name and VA file number of that person.

**ITEM 11.** VA publishes information pamphlets for each benefit. The information pamphlets furnish general information on the benefit program you are applying for. You should have received one of the following information pamphlets with your application:

\* VA Pamphlet 22-90-2, Summary of Educational Benefits Under the Montgomery GI Bill--Active Duty Educational Assistance Program, Chapter 30, of Title 38 U.S.C.

\* VA Pamphlet 22-90-3, Summary of Educational Benefits Under the Montgomery GI Bill--Selected Reserve Educational Assistance Program, Chapter 1606, of Title 10 U.S.C.

\* VA Pamphlet 22-79-1, Summary of Educational Benefits Under the Post-Vietnam Era Veterans' Educational Assistance Program, VEAP. If you check "NO" in ITEM 11, VA will send you one of these pamphlets based on your response to ITEM 1. You may also request a pamphlet from the person who furnished you this application.

**ITEM 12A.** If you have selected the school or training establishment you plan to attend, show this information here.

**ITEM 12B.** If you know the date your training program will begin, show the date here.

**ITEM 12C.** If you have decided on your educational, professional or vocational goal, list your final objective

(for example, Masters Degree, Certified Public Accountant, Computer Technician). List the course of study you will pursue to achieve that goal (for example, Bachelors Degree in accounting, Computer Technology Diploma).

ITEM 12D. Show the type of training you plan to pursue here.

**NOTE ON CORRESPONDENCE TRAINING:** If you plan to enroll in a correspondence course or a combination correspondence-residence course, be sure the field of study is suitable to your abilities and interest before you sign a contract with the school. Information on correspondence courses is available at the nearest U.S. Veterans Assistance Center or VA regional office. The correspondence school may require you to pay for all or the majority of the course even though you complete only a portion of it. Unlike the other types of training programs listed, payments for correspondence courses are made quarterly after VA receives your certification showing the number of lessons you completed during the previous quarter. The information pamphlets described in Item 11 give additional information on payments.

You must affirm a contract for enrollment in a correspondence course more than 10 days after you sign the contract. If you decide not to enroll in a correspondence course after signing a contract but before signing the affirmation, you are entitled to receive a full refund from the school of any payment made for the course.

**NOTE ON FLIGHT TRAINING:** If you plan to enroll in a flight course, you must have a private pilot's license and meet the medical requirements for the desired license before beginning training, and throughout your flight training program.

VA VOCATIONAL AND EDUCATIONAL COUNSELING HELP AVAILABLE. If you need help planning your individual educational and career goals, VA offers a wide range of counseling services to help you make these decisions. Services include educational and vocational guidance and such testing as necessary for you to develop a greater understanding of your skills, talents, and interests. Call VA Toll-Free at (800) 827-1000 or TDD (800) 829-4833 for further information on VA counseling.

**ITEM 13A.** If you are on active duty or on Terminal Leave (on leave continuously between the date that you last performed military duties until the date of your discharge from active duty), check "YES."

**ITEM 13C.** You can help us process your application faster if you attach the original or copy of your discharge paper (DD Form 214) for each period of active military service that you completed. If you do not have this information, we may have to request verification of your service from the military. This could delay our processing of your claim.

We will return all original documents that you submit with your application. If you have recorded the original document with a county recorder, you may submit a copy of that document instead of the original document. If you complete your application at a VA office, VA personnel can copy the original of any documents needed to support your claim. These documents are then returned to you immediately.

**ITEMS 13D through 13F.** If you are NOT attaching a certified copy of your DD Form 214 for each period of active duty, for each period, show the date you entered active duty, the date you were separated from active duty, and your branch of service.

**NOTE: IF YOU HAD SERVICE DURING THE VIETNAM ERA:** If you enlisted before January 1, 1977 under the delayed enlistment program, and first entered on active duty between December 31, 1976 and January 2, 1978, attach a copy of your enlistment contract, training agreement, or military orders (dated before January 1, 1977) that directed you to enter active service.

**ITEM 14C.** If you had any training in a technical or vocational school, college or university, or any other training past the high school level, please furnish details. If you attended a military service academy, you should so state, giving dates attended, and if you received a degree, the date of the degree. If you submit a copy of your DD Form 214, you do not have to list other military training. If you worked in an apprenticeship or other on-the-job training program and apply for benefits for a similar program, show the name of the program, the dates attended, and the place (city and state) where you received this training. If you need more space, continue in Item 18, REMARKS.

**ITEM 15.** Show your occupation before and after leaving military service, and the approximate number of months in that occupation. If you ever held a license to practice a profession or journeyman rating to work at a trade, state the name of the license or journeyman rating, and the State in which the license was held. If you held no license or rating, write "NONE." We only use this information if you apply for benefits for a similar program. Examples of a license include the following: CPA, teacher, lawyer, electrician, bricklayer, etc.

**ITEM 16.** These questions apply to active duty personnel, reservists, current and former ROTC participants, and government employees. All others should skip this item.

**NOTE:** VA (and not DOD) pays chapter 30 and 32 benefits. Tuition assistance and government employee training benefits are separate benefits from VA education benefits.

# **ITEM 16A.** THIS QUESTION IS FOR ALL MEMBERS OF THE RESERVE OFFICERS TRAINING CORPS (ROTC).

If you ever received, or if you plan to receive, a scholarship from the Reserve Officers Training Corps which pays a stipend, AND tuition, fees, books and supplies, you must check "YES," and show complete details in Item 18, REMARKS. If you are not sure, explain why you think you might be eligible for an ROTC scholarship including tuition and fees in Item 18, REMARKS.

**ITEM 16B.** THIS QUESTION IS FOR ALL MEMBERS OF THE SELECTED RESERVE. If you are receiving or plan to receive financial assistance (scholarship) under section 2107, title 10 U.S. Code as a member of the ROTC program, check "YES," and show complete details in Item 18, REMARKS. If you are not sure, explain why you think you might be eligible for assistance under section 2107 in Item 18, REMARKS.

**ITEM 16C.** THIS QUESTION IS FOR ALL APPLICANTS ON ACTIVE DUTY WHILE RECEIVING BENEFITS. If you are receiving or anticipate to receive tuition assistance from the armed forces or the Public Health Service during any part of your training, you must check "YES" and show complete details in Item 18, REMARKS. Please identify the source of tuition assistance. If you are not sure, explain why you think you might be eligible for tuition assistance in Item 18, REMARKS.

**ITEM 16D.** THIS QUESTION IS FOR EMPLOYEES OF THE UNITED STATES GOVERNMENT. IT DOES NOT INCLUDE ACTIVE DUTY PERSONS OR WORK-STUDY RECIPIENTS. If you may receive benefits under the Government Employees' Training Act for your training, state full details in Item 18, REMARKS.

**ITEM 17.** THIS QUESTION IS ONLY FOR MONTGOMERY GI BILL VETERANS WHO ENTERED SERVICE (OR AGREED TO DELAYED ENTRY) BEFORE JANUARY 1, 1977 AND HAVE EDUCATIONAL ASSISTANCE ENTITLEMENT REMAINING UNDER THE VIETNAM ERA GI BILL. If you are currently married or if you have children under age 18 (under age 23 if in school), you should complete and return VA Form 21-686c. If your children are in school, you should also complete and return VA Form 21-674 for each child. If your parent(s) are dependent on you for support, you should complete and return VA Form 21-509.

**ITEM 18.** Use this space to provide additional information that does not fit elsewhere on this form, or that you think will help VA process you claim. Refer to other Item numbers on this form to help us match you answers to the correct question. Attach additional sheets of paper if necessary.

ITEM 19. Be sure to sign and date the form in this item.

**PART II.** Part II contains Items 20 A and B which only apply if you are on active duty in the Armed Forces. Part II does not apply if you are in the Selected Reserve or if you are on terminal leave.

### **GENERAL INSTRUCTIONS**

ADVANCE PAYMENT--You may receive an advance payment if :

\* Your school participates in the advance payment program

and

\* you enroll in school on at least a half-time basis.

The advance payment will include benefits for the initial month or partial month of training, and the following month. To request an advance payment, contact the school you will attend at least 30 days but not more than 120 days before the beginning of the term. VA will mail the advance payment check to the veterans certifying official at the school. The veterans certifying official will give you the check upon registration but no earlier than 30 days before classes begin.

**MORE HELP** - If you need help in completing this application, call VA TOLL FREE at **1-888-GI-BILL-1** (**1-888-442-4551**). If you are hearing impaired, call toll-free at **1-800-829-4833**. You can also get education assistance even after normal business hours at our education internet site: www.va/gov/education/.

## HOW TO FILE YOUR CLAIM

After completing the fill-in portion of the application, do the following:

If you have selected a school or training establishment,

\* Give the completed portion of this application to the veterans certifying official at the school or training establishment you have selected.

\* Request the certifying official to complete VA Form 22-1999, Enrollment Certification.

\* Have the school certifying official send both your application and the Enrollment Certification to VA.

If you have not selected a school or training establishment,

\* Send the completed portion of this application to the regional processing office in the region of your home address.

Eastern Region: VA Regional Office P. O. Box 4616		Central Region: VA Regional Office P. O. Box 66830		Western Region: VA Regional Office P. O. Box 8888		Southern Region: VA Regional Office P. O. Box 54346		
Buffalo,	Buffalo, NY 14240-4616		St. Louis, MO 63166-6830		Muskogee, OK 74402-8888		Atlanta, GA 30308-0346	
Serving the following states:		Serving the following states:		Serving the following states:		Serving the following states:		
СТ	NY	CO	MO	AK	NV	AL	MS	
DE	OH	IA	MT	AZ	OK	AR	NC	
DC	PA	IL	NE	CA	OR	FL	PR	
ME	RI	IN	ND	HI	TX	GA	SC	
MD	VT	KS	SD	ID	UT	LA	TN	
MA	VA	KY	WI	NM	WA		US Virgin Islands	
NH	WV	MI	WY	Pacific Islands				
NJ	Foreign Schools	MN						

**PRIVACY ACT INFORMATION:** No benefits may be paid unless a completed application has been received (38 U.S.C. 3471). The information requested on this form is necessary to determine your eligibility to education benefits. The responses you submit are considered confidential (38 U.S.C. 5701), and may be disclosed outside VA only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 58VA21/22/28. Compensation, Pension, Education and Rehabilitation Records - VA, published in the Federal Register. Information submitted is subject to review through computer matching programs with other agencies for the purposes of eligibility verification and debt collection.

**RESPONDENT BURDEN**: Va may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 35 minutes per response, including the time for reviewing instructions searching existing data sources, gathering

estimated to average 35 minutes per response, including the time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-888-GI-BILL-1 (1-888-442-4551) for mailing information on where to send your comments.