

# VA Educational Benefits Request Form – Summer 2026

University of Wisconsin - Milwaukee

Military Educational Benefits Office

Student Union MAVRC- EG40, PO Box 469, Milwaukee, WI 53201

Phone: (414) 229-6627

Fax: (414) 229-5699

Email: vets@uwm.edu

Website: www.uwm.edu/mebo

Full Name: \_\_\_\_\_ New Address?  YES  NO  
Last First MI

Address: \_\_\_\_\_  
Street Address City State Zip Code Apt #

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Campus ID #: \_\_\_\_\_ VA File #: \_\_\_\_\_ DOB: \_\_\_\_\_  
(For Ch.35 Students Only) Mo. Day Year

Type of Degree (ie. Grad, Undergrad, Cert.): \_\_\_\_\_ Major/Program: \_\_\_\_\_

Did your school change from last semester?  YES  NO

Do you have an Educational Bonus (Kicker)?  YES  NO

If yes, please list the amount: \$ \_\_\_\_\_  
(You must submit a copy of your kicker contract if you have not done so already.)

## Type of Benefits

Check the type of benefit you are requesting:

- Chapter 30 (Active Duty GI Bill – more than 3 years)  Chapter 35 (Survivors' and Dependents)  
 Chapter 33 (Post 9/11 Veterans Educational Assistance Act)  Chapter 1606 (Reserves/National Guard GI Bill)

## Summer Credits and Dates

For Summer 2026, how many TOTAL credits are you registered for? \_\_\_\_\_ (List the # of credits for each session you are attending below)

	Dates of Classes	# of Credits	Dates of Classes	# of Credits	
<sup>3</sup> WK	June 1 - June 20, 2026	_____	<sup>6</sup> WK	June 15 - July 25, 2026	_____
<sup>4</sup> WK	June 1 - June 27, 2026	_____	<sup>6</sup> WK	June 29 - August 8, 2026	_____
<sup>4</sup> WK	June 29 - July 24, 2026	_____	<sup>6</sup> WK	July 13 - August 22, 2026	_____
<sup>4</sup> WK	July 27 - August 22, 2026	_____	<sup>8</sup> WK	June 29 - August 22, 2026	_____
<sup>6</sup> WK	June 1 - July 11, 2026	_____	<sup>12</sup> WK	June 1 - August 22, 2026	_____

Write the date and # of credits for any summer course you're enrolled in that is NOT listed in the above sessions:

Do you plan to graduate in Summer 2026?  YES  NO

Are you repeating or auditing any classes during any session of the Summer semester?  YES  NO

If yes, please list the courses you're auditing or repeating and the grades you previously received: \_\_\_\_\_

\*\*\* See note below

Did you contribute \$1200 to the Montgomery GI Bill? YES NO

## Active Duty

Are you on active duty or will you be on active duty during session of the Summer semester?  YES  NO

If yes, please list the dates you will be on active duty: \*\* \_\_\_\_\_

\*Repeating/Auditing Courses: You can only be paid for repeated courses when the initial grade received was an F. VA won't pay for repeats of "D" unless the course requires a "C" to progress, i.e. Math 141. No payment can be received for audited courses. Short-term courses could affect the amount of your GI Bill. Enrollment in some unapproved off-campus sites could result in a VA over-payment.

(Over)

## Transferring to UW-Milwaukee Only

Complete this section ONLY if this is the 1<sup>st</sup> TIME you are using your federal military benefits at UW-Milwaukee:

List the name of the academic institution where you used your federal military benefits last.

Name of Academic Institution: \_\_\_\_\_

(If you haven't used your benefits before, write N/A) \_\_\_\_\_

If you are not currently enrolled in a Degree Granting Program, let us know which program you are in:

- N/A, I am in an undergraduate or graduate degree granting program       Certificate Program  
 Temporary Non-Degree, but will be changing to Degree Program       Teaching Licensure Program  
 Other – Explain: \_\_\_\_\_

## ALL APPLICANTS - Read & Sign

I certify that the information on this form is correct to the best of my knowledge and that I am enrolled at UW-Milwaukee in the amount of credits listed on this form. In the event that I withdraw, change credit loads, or make changes to any program during the semester, I agree to report the change to the UW-Milwaukee Military Education Benefits Office.

I have read, understand, and agree to the above:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_  
Mo. Day Year

### FOR OFFICE USE ONLY:

NOBE on file?  No  Yes

DD 214 on file?  No  Yes  N/A

Kicker contract on file?  No  Yes  N/A

Change of Program/Place of Training (22-1995) on file:  No  Yes  N/A

Submitted Transcripts for evaluation from Civilian Schools and/or Military experience?  No  Yes  N/A

Above information is collected and recorded on VA Once:  No  Yes, Date of Entry: \_\_\_\_\_

If no, send student a request:  No  Yes, Date of Request: \_\_\_\_\_

Item(s) Requested: \_\_\_\_\_

Request for Champ VA?  No  Yes If yes, enrollment verification sent?  No  Yes, Date Sent \_\_\_\_\_

Financial Aid Panel Screens:

- Veterans Data Panel       Checklist Added       Comment Added  
 Applied for Fin Aid       Awarded

Misc. Notes

<b>33:</b> various Training Time	<b>30(3+):</b> F26114 Undergrad	<b>30(&lt;3):</b> F26115 varies by session	<b>1606:</b> F26113	<b>35:</b> F26117 varies by session
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