

**University of Wisconsin - Milwaukee**  
**Military Educational Benefits Office**  
**Mellencamp Hall, Room 168A**  
**PO Box 469, Milwaukee, WI 53201**

**Request Form to ACTIVATE/REACTIVATE the WI GI Bill**

Name: \_\_\_\_\_  
Last First Middle

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

D.O.B. \_\_\_\_\_

I would like to **ACTIVATE/REACTIVATE** my WI GI Bill Benefit for the following semester:

\_\_\_\_\_ Summer 23

\_\_\_\_\_ Winter 24

\_\_\_\_\_ Fall 23

\_\_\_\_\_ Spring 24

I understand that in order to suspend my WI GI Bill Benefit for a semester I must complete the proper form in the office **BEFORE** registering for classes for the semester that I intend to use it.

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

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