



Spring 2023 VA Responsibilities & Certification Authorization

Office of Financial Aid
671 Winyah Drive
Orlando, FL 32803

First Name _____ MI _____ Last Name _____

SSN _____ Student ID _____

Degree program _____

VA Education Benefits Type _____

I am the: Veteran Dependent

I am on Active Duty: Yes No

I will be applying for federal and state financial aid: Yes No

I officially request that ____ credit hours of the coursework that I am currently registered to attend be certified to the VA.

Address _____

City _____ State _____ Zip _____

Phone _____

Student Email _____

Responsibilities

- Eligible Veterans and Dependents are responsible for notifying the VA Certifying Official in the Financial Aid Office at AdventHealth University of their intention to apply for VA education benefits each award year.
- Register only for courses that will apply to your degree program.
- **Promptly report any changes (withdrawals, audits) in your enrollment to the Certifying Official on campus. Failure to do so may result in an overpayment and a debt.**
- Any change of major must be reported **IMMEDIATELY!**
- If there has been a change in your name or address, please request a Name/Address Change form from the Financial Aid Office.

Signature _____ Date _____