

Summer 2024 VA Responsibilities & Certification Authorization

Office of Financial Aid 671 Winyah Drive Orlando, FL 32803

First Name		MI	Last Name			
			Address			
SSN	Stud	dent ID	City	State	Zip	
Degree program			Phone			
VA Education	on Benefits Typ	ре	Student Ema	ail		
I am the:	□Veteran	□Dependent	Responsit		nendents	
I am on Acti Duty:	ive □Yes	□No	are resp Certifyir	 Eligible Veterans and Dependents are responsible for notifying the VA Certifying Official in the Financial Aid Office at AdventHealth University of 		
I will be applying for federal and state financial aid: □Yes □No		their int educatio • Register	ention to apply fon benefits each only for courses	or VA award year. s that will		
hours of t	he coursew registered t	at credit ork that I am o attend be	 Prompted (withd enrolln Official so may and a comported of the ported of the	your degree protetly report any or rawals, audits) nent to the Cerlon campus. Far result in an ordebt. Inge of major much label has been a charr address, please address Change funcial Aid Office.	changes in your tifying ailure to do verpayment ust be Y! nge in your e request a	
Signature				Date		