

Complete this section if this is the first time you are using your V.A. Benefits at UW-Milwaukee:

List all other Academic Institutions attended.

1. _____
2. _____
3. _____

(If you have used your VA benefits at another school you must complete and submit to our office form 22-1995.)

Are you enrolled in a Degree Program? ___ Yes ___ No

If yes – Degree Program Enrolled in _____

(B.A., B.S., M.A., M.S., Ph.D., etc.)

Major/Program _____ Did major change from last semester? _____

(If your program has changed you must complete and submit to our office form 22-1995.)

If not enrolled in a Degree Granting Program, are you in:

___ Temporary Non-Degree, but will be changing to Degree Program. When? _____

___ Certificate Program ___ Teaching Licensure Program

___ Other; Explain: _____

ATTENTION: ALL APPLICANTS – Read and Sign

I certify that I am enrolled in the amount of credits listed above. In the event of withdrawal or change in any program during the semester, I agree to report such fact to the UWM Veteran Affairs Office.

I have read and understand the above:

Signature: _____

Date: _____

Student: Have you applied for federal financial aid for the 06-07 academic year? ___ yes ___ no