Request for Participation in the Yellow Ribbon Program

NAME (Last, First, MI):_________________________________________________________ SU ID#: _______________

PHONE: ___________________________________   SU EMAIL: ______________________________________________

STATEMENT OF UNDERSTANDING

● I understand that the Department of Veteran Affairs formally establishes eligibility for the Post-9/11 GI Bill’s® Yellow Ribbon Program and that this Request for Participation is contingent on Department of Veteran Affairs’ approval for such benefit.

● I believe I am 100% eligible for the Post 9/11 GI Bill® based on the following qualifications set and determined by the Department of Veterans Affairs:
  ● I served an aggregate period of active duty after September 10, 2001, of at least 36 months.
  ● I was honorably discharged from active duty for a service-related disability, and I served 30 continuous days after September 10, 2001.
  ● I am a dependent eligible for Transfer of Entitlement under the Post-9/11 GI Bill® based on a veteran’s service under the eligibility criteria listed above.

● I certify that I have applied to the Department of Veterans Affairs for my Certificate of Eligibility and will submit this Certificate to the SU VA Certifying Official as soon as possible prior to the start of my academic coursework. Failure to submit this confirmation may result in my removal from the Yellow Ribbon Program participation list.

● I understand that submitting this form does not guarantee my admittance to the Yellow Ribbon Program.

● I understand that my eligibility for the Yellow Ribbon program requires me to maintain continuous enrollment; SU will require me to reapply to the Yellow Ribbon program if I am required to apply for readmission to SU.

● I understand that I must maintain satisfactory academic standing as defined in SU’s Satisfactory Academic Progress (SAP) policy, which states: Successful completion of 80% of the coursework attempted; Maintain a minimum cumulative grade point average of 2.0 in SU coursework; Completion of the degree within the maximum number of 175 credit hours.

● I understand that changes made to my class schedule may result in overpayment of Veterans Administration benefits, and that I am fully responsible for any overpayment of Veterans Administration benefits that may occur.

☐ I have read and understand my obligation to annually meet Southwestern University's Satisfactory Academic Progress guidelines as part of the eligibility requirements for continued participation in the Yellow Ribbon Program. The information I submit on this form is true and correct to the best of my knowledge.

SIGNATURE: ______________________________________________________  DATE: ________________________

Please return this completed form to:
Nadia Mahannah
Associate Registrar & VA School Certifying Official
Office of the Registrar, Prothro Bldg, Rm 100
mahannan@southwestern.edu
phone (512) 863-1443 and fax (512) 863-1685

GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S. government website at http://www.benefits.va.gov/gibill.