



**HENRY FORD COMMUNITY COLLEGE**

Office of Financial Aid  
5101 Evergreen Rd.  
Dearborn, MI 48128-1495

Phone: 313-845-9616 Fax: 313-845-9825  
Http://www.hfcc.edu  
Federal School Code: 002270

**2009/10 VETERAN EDUCATION BENEFITS  
VERIFICATION FORM**

Student Name: \_\_\_\_\_ Student ID# or SSN: \_\_\_\_\_

**Please check the statement that is true for you:**

- 1. I am not eligible to receive veteran education benefits while attending HFCC during the 2009/10 academic year.
- 2. I am eligible, but choose not to use my veteran education benefits while attending HFCC during the 2009/10 academic year.
- 3. I will receive veteran education benefits Chapter \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ per month while attending HFCC during the 2009/10 academic year.
- 4. The veteran education benefits Chapter \_\_\_\_\_ I am receiving while attending HFCC have changed or will be changing to \$ \_\_\_\_\_ per month, beginning \_\_\_\_\_.

**If you checked item 2, 3 or 4, the Veteran’s Coordinator in the HFCC Registrar’s Office MUST sign this form.**

I understand that my monthly veteran education benefit amount must be considered in determining my eligibility for financial aid. If the HFCC veteran’s coordinator notifies the Financial Aid Office that my monthly benefit amount is not as I reported, my eligibility for financial aid will change and I may be required to repay financial aid funds that have been disbursed to me.

\_\_\_\_\_  
Student’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Veteran Coordinator’s Signature  
(Required if you checked item 2, 3 or 4)

\_\_\_\_\_  
Date

**RETURN THIS COMPLETED FORM TO THE HFCC FINANCIAL AID OFFICE.**