



## Veterans

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# Veterans Enrollment Certification Request Form

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### Instructions

The HFC certifying official will review classes provided on the educational plan and transcripts of previously attended institutions. This will determine courses which will be submitted to the Veterans Affairs Department for consideration. Transcripts of all institutions previously attended will be necessary to ensure best customer service. Accuracy of information provided will impact your timeframe and whether the U.S. Department of Veterans Affairs will fund coursework.

Chapter information must be provided to begin certification process. If you are unsure of what benefit, visit [www.gibill.va.gov](http://www.gibill.va.gov).

Submit completed form to Welcome Center drop box, Email to [veterans@hfcc.edu](mailto:veterans@hfcc.edu), Fax to 313-845-6464, or Mail to:

Welcome Center  
5101 Evergreen Rd  
Dearborn, MI 48128

### Student Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_

HANK ID Number: \_\_\_\_\_

Current Address: \_\_\_\_\_ City/State/Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Veteran       Reservist/National Guard member       Dependent/Spouse of Veteran

VA Educational Benefit Chapter: \_\_\_\_\_

Semester and year you would like to be certified for: (Ex: Fall 2013)

Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_



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### Certification Information

List all classes that you have registered for in the semester indicated above. Only courses which comply with VA certification guidelines are eligible for certification.

Current HFC Academic Program of Study:

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Course (ie. ENG)	Section (ie. 132-01)	Credit Hours	Course Date (ie. 8/23/13 – 12/15/13)	Added	Dropped

Total Hours: \_\_\_\_\_



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## **Authorization**

The completion and signature of this form authorizes Henry Ford College to certify enrollment for the courses listed above if they meet certification compliance guidelines with the Department of Veterans Affairs to ensure consideration for Educational Training Benefits. You understand that you must submit this form each semester and notify the HFC Office of Veterans Services of any changes to your schedule. You acknowledge that the Department of Veterans Affairs will determine what courses will be funded and that you will be responsible for balances due as a result of denial or change in funding or non-attendance.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Submit completed form to: Welcome Center DROP BOX, email to [VETERANS@HFCC.EDU](mailto:VETERANS@HFCC.EDU) or FAX to (313)845-6464**

Welcome Center \* 5101 Evergreen Rd \* Dearborn, MI 48128  
Phone 313-845-9688 \* E-mail veterans@hfcc.edu