

Welcome to Carson-Newman University. First and foremost, whether you have the title of Veteran, Servicemember or Veteran Dependent, each title requires a service and sacrifice and we would like to say thank you. We are proud to have you enrolled at C-N.

The Office of Military Services is the central point that connects all student-veterans, servicemembers and veteran dependents with academic and personal support resources, both on and off campus. Our goal is to support your academic and personal endeavors from acceptance to graduation.

# **C-N Veterans Education Assistance Information Packet**

All students receiving VA educational benefits, Federal Tuition Assistance (FTA), or TN STRONG must complete the following packet to be certified to receive education benefits.

The following are required documents to be submitted by the student:

Completed copies of the following:

Page 2-4: Student Beneficiary Information

Page 5: VA Educational Benefits Recipient Statement of Understanding

Page 6: Letter of Acknowledgement of Policies

Page 7: Veteran Information Sheet (Current servicemembers and veterans only)

## Additional Documentation:

Certificate of Eligibility or Notice of Basic Eligibility (VA Benefits Only)

#### In addition, Veterans and Servicemembers are required to submit the following:

Member 4 Copy DD-214
Military Transcripts (Joint Services Transcripts or CCAF Transcript)

All documents can be submitted in person, faxed, mailed, or a scanned pdf emailed to the contact information below.

## Office of Military Services Contact Information

#### **Mailing Address:**

Carson-Neman University Office of Military Services C-N Box 71985 1646 Russell Avenue Jefferson City, TN 37760

#### Office Location:

2<sub>nd</sub> Floor, Fite Building, Registrar's Office Phone: 865-471-3519 Fax: 865-471-2013

Email: militaryaffairs@cn.edu



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# STUDENT BENEFICIARY INFORMATION

Student Information			
Name (Last, First, Middle):			
Social Security Number (Last 4):	C-N Stu	ident ID Num	ber:
Carson-Newman e-mail:			@cn.edu
Personal e-mail:			
Phone Number:			
Street Address:			
City: Star	te:	Zip Code:	
Education Information			
<b>Degree Level Seeking:</b> □ Undergraduate	☐ Graduate		ctoral
Major:			
Minor(s):			
Seeking Teacher Licensure:   Yes	□ No		
Type of Student upon Admission:			
<ul> <li>□ Traditional freshman</li> <li>□ Transfer Undergraduate (prior college creded)</li> <li>□ Adult Undergraduate Studies</li> <li>□ Second Degree (graduate or doctoral)</li> </ul>	dit – not including mil	itary transfer o	credit)
First Semester at <u>Carson-Newman</u> : ☐ Fall	I □ Spring □ Summ	ner Year:	
Education Benefit Information			
Student Beneficiary Type:   Veteran	□Current Servicem	ember	☐ Veteran Dependent
Are you currently on active duty? ☐ Yes	□ No		
Are you the spouse or dependent of an ac	tive duty member?	□ Yes □ No	•



# **Educational Benefit(s) Requesting to use at Carson-Newman:**

☐ Chapter 30 (Montgomery GI Bill® – Active Dut Department of Veterans Affairs (VA). More inform at the official U.S. government Web site at https://	nation about education benefits offered by VA is available
☐ Chapter 31 (Vocational Rehab)	
☐ Chapter 33 ( <b>Veteran-</b> Post 9/11 GI Bill)	
☐ Chapter 33 Transfer of Entitlement ( <b>Depender</b>	nt – Post 9/11 GI Bill)
☐ Chapter 35 (Survivors and Dependents Educa	tional Assistance)
☐ Chapter 1606 (Montgomery GI Bill – Selected	Reserve/Guard)
☐ Chapter 1607 (Reserve Educational Assistanc	e Program –REAP)
☐ TN STRONG (TN National Guard)	
☐ Federal Tuition Assistance (FTA)	
Have you previously received VA Educational If yes, please indicate the institution and years in	<b>Benefits at another institution?</b> ☐ Yes ☐ No * the space provided below:
Institution Name	Terms and Years Attended
Chapter 31 Beneficiaries ONLY-	
Vocational Rehabilitation and Employment (VR&I	E) counselor-
Name:E-	mail:
Chapter 35 Beneficiaries ONLY-	
Sponsor's Information -	
Name:	
SSN:	
*Required for certification of benefits for Ch. 35 D	Dependents
TN STRONG Beneficiaries ONLY-	
Have you attended Basic Soldier Training (BST)?	? □ Yes □ No
Have you attended Advanced Initial Training (AIT	



# VA EDUCATIONAL BENEFITS RECIPIENT STATEMENT OF UNDERSTANDING

This form is required for all C-N students who are recipients of VA educational benefits. By initialing after each item, you are acknowledging you are responsible for the following:

# PLEASE INITIAL AFTER READING EACH ITEM

Signature:

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Eligibility Responsibilities:	
Eligible Veterans, reservists, active duty, and dependents are responsible for requesting VA Educatio benefits through the Office of Military Services each semester	n
I understand that my enrollment will not be certified until the required documents in this packet and my Letter of Eligibility is submitted to the Carson-Newman School Certifying Official (SCO)	/ VA
I understand I must be accepted for admission, declare a major, and register for classes before being certified by SCO	
I understand classes must apply to my degree and be in accordance with the Standards for Progress be eligible for VA benefits	to
I understand I must maintain satisfactory attendance, conduct, and progress as defined by the univers in order to continue receiving VA educational benefits	sity
I understand I will not receive benefits for courses repeated if I have already made a passing grade, unless degree completion requires a certain grade	
I understand that I must report any classes, added, dropped, or withdrawn, or if I change my major fro <u>immediately</u> to the Office of Military Services	m
I understand that some chapters require monthly self-verification of enrollment on the GI Bill® Website www.gibill.gov in order for payment to be processed (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 Web site at https://www.benefits.va.gov/gibill.)	;
Financial Responsibilities: I understand I will not be allowed to register for future courses until all your financial obligations to the university for the current term are met with student accounts	
Students that withdraw or drop will be responsible for repaying tuition and fees either to the VA or the university	
I agree to accept liability for any overpayments of VA educational benefits	
I am responsible for paying any tuition and fees not covered by my Veterans benefits	
I allow Carson-Newman University to discuss my VA paperwork with the Department of Veteran Affair when necessary	S
Name (Printed): C-N ID#	

Date



TO: Carson-Newman University Office of Military Services FROM: The Undersigned Student Beneficiary
I have received a copy of the following documents:
<ul> <li>Veterans Affairs Educational Benefits Regulation</li> <li>Standards for Progress</li> <li>Tuition Deferment Policy</li> <li>Military Call to Active Duty Policy</li> <li>Academic Credit through the Military</li> </ul>
I have read the above policies and understand my responsibility in compliance to continue to receive Military education benefits at Carson-Newman University.
My signature below indicates that I am aware of and understand the policies and procedures for receiving educational benefits.
Printed Name

Signature \_\_\_\_\_ Date\_\_\_\_



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serve you.

# **VETERAN INFORMATION SHEET Student Information** Name (Last, First): C-N Student ID Number: **Current Military Status: Branch of Service:** ☐ Active Duty ☐ Air Force ☐ Reserves ☐ Army ☐ National Guard State: \_\_\_\_\_ ☐ Coast Guard ☐ Active Guard/Reserves (AGR) □ Marines □ Veteran ☐ Navy □ Retired Current Rank or Rank at Separation: Years of Service: **Retired from the Military?** $\square$ Yes $\square$ No We welcome you to share any of the following information (optional): Have you been deployed? $\square$ Yes $\square$ No If so, how many tours? \_\_\_\_\_

Tell us about you, your military experience, personal and academic goals, and how we can best