



## GI/VETERANS INFORMATION FORM

Students seeking to use their Veterans education benefits must complete the information below for each session of attendance. The Enrollment Certification (Form 22-1999) will be processed upon verification of enrollment.

Name \_\_\_\_\_ AUID/SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ Home # \_\_\_\_\_

City/ST/ZIP \_\_\_\_\_ Work # \_\_\_\_\_

New Student  Yes  No **Chapter Benefit #** \_\_\_\_\_

Session Attending:  Fall  Winter  Spring  Summer **Year** \_\_\_\_\_

Indicate the degree plan you are pursuing:

**Catalog**  
 2022 – 2023 University Catalog  
 2024 – 2025 University Catalog

**Undergraduate**

<input type="checkbox"/> BA Professional Development <input type="checkbox"/> BBA Accounting – Public Accounting Track <input type="checkbox"/> BBA Accounting – Management Accounting Track <input type="checkbox"/> Dual BBA/MBA Accounting <input type="checkbox"/> BBA Entrepreneurship <input type="checkbox"/> BBA General Business <input type="checkbox"/> BBA Management <input type="checkbox"/> BBA Project Management	<input type="checkbox"/> BS Applied Studies (34) <input type="checkbox"/> BS Human Relations and Business (35)  <input type="checkbox"/> Undecided (19) <input type="checkbox"/> Non-degree seeking (99)
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**Graduate**

<input type="checkbox"/> MA Clinical Mental Health Counseling (Formerly Professional Counseling) <input type="checkbox"/> MA Marriage and Family Therapy <input type="checkbox"/> MA School Counseling <input type="checkbox"/> MA Professional Development  <input type="checkbox"/> Undecided (19) <input type="checkbox"/> Non-degree seeking (99)	<input type="checkbox"/> MBA Accounting <input type="checkbox"/> MBA Entrepreneurship <input type="checkbox"/> MBA General Business <input type="checkbox"/> MBA Management <input type="checkbox"/> MBA Project Management <input type="checkbox"/> MBA Strategic Leadership <input type="checkbox"/> MS Agile Project Management <input type="checkbox"/> MS Data Analytics	<input type="checkbox"/> MS Family Studies <input type="checkbox"/> MS Family Studies with a specialization in Christian Counseling  <input type="checkbox"/> MS Human Relations & Business <input type="checkbox"/> MS Human Resource Management <input type="checkbox"/> MS Human Resource Training & Dev <input type="checkbox"/> MS Managerial Science
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<b>Undergraduates:</b> 3 hours = ¼ time 6 hours = ¾ time 9+ hours = full time	<b>Graduates:</b> 3 hours = 1/2 time 6+ hours = full time
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I understand that I am responsible for payment of tuition and fees not covered by VA benefit disbursements and for knowing and abiding by VA regulations in cases of overpayment. I authorize Amberton University to release my academic records, including grades, to the Department of Veterans Affairs as deemed appropriate for reporting and facilitation of payments. I authorize the University to contact me via email, telephone and/or mailed correspondence as it relates to University information.

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