

## 4Cs Veteran Benefits Application 2025-2026

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_/\_\_\_\_/\_\_\_\_  
PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

**ENROLLMENT PLANS – Check each term in that you intend to take classes.**

\_\_\_\_\_ Summer 2025                      \_\_\_\_\_ Fall 2025                      \_\_\_\_\_ Spring 2026  
\_\_\_\_\_ Winter Intercession                      \_\_\_\_\_ Summer 2026                      \_\_\_\_\_ Aviation

**VA BENEFITS APPLICATION STATUS**

- Have you previously received VA education benefits at CCCC?                      Yes      No
- Have you previously received VA education benefits at another school?                      Yes      No
- Have you applied for benefits using the VA’s online or paper application?                      Yes      No
- Have you received a Certificate of Eligibility from the VA?                      Yes      No

***Please send a copy of the Certificate of Eligibility (CoE) or a Summary of Benefits screen shot (found on [www.va.gov](http://www.va.gov)) to the 4Cs Military and Veteran Service Advisor along with this completed form.***

**CHECK YOUR STATUS**

\_\_\_\_\_ Veteran  
(branch: \_\_\_\_\_)

\_\_\_\_\_ National Guard

\_\_\_\_\_ Reserves

\_\_\_\_\_ Active Duty  
(branch: \_\_\_\_\_)

\_\_\_\_\_ Dependent Child /Spouse

**CHECK ALL BENEFITS REQUESTED**

- \_\_\_\_\_ MA Categorical Tuition Waiver
- \_\_\_\_\_ Ch.33 Post 9/11 GI Bill
- \_\_\_\_\_ Ch.30 Montgomery GI Bill
- \_\_\_\_\_ Ch.31 Veteran Readiness & Employment (VR&E)
  
- \_\_\_\_\_ MA National Guard Tuition & Fee Waiver
- \_\_\_\_\_ Ch.33 Post 9/11 GI Bill
- \_\_\_\_\_ Ch.30 Montgomery GI Bill
- \_\_\_\_\_ Ch.1606/1607 Selected Reserves Montgomery GI Bill
  
- \_\_\_\_\_ Ch.33 Post 9/11 GI Bill
- \_\_\_\_\_ Ch.30 Montgomery GI Bill
- \_\_\_\_\_ Ch.1606/1607 Selected Reserves Montgomery GI Bill
  
- \_\_\_\_\_ MA Categorical Tuition Waiver
- \_\_\_\_\_ Military Tuition Assistance (TAP)
- \_\_\_\_\_ Ch.33 Post 9/11 GI Bill
- \_\_\_\_\_ Ch.30 Montgomery GI Bill
  
- \_\_\_\_\_ **Ch.33 Post 9/11 GI Bill**
- \_\_\_\_\_ **Ch.35 Dependent of Disabled or Deceased Veteran**
- \_\_\_\_\_ **Veteran’s VA File Claim# \_\_\_\_\_**

**AFFIRMATION**

In order to receive Veteran and military education benefits, I must register for appropriate courses each semester. I must attend all classes (or participate in on-line classes) through the entire semester to retain benefits. If I make any changes to my schedule, I will notify the Financial Aid Office and the Military and Veteran Services Advisor immediately.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_