

Central Ohio Technical College
Veteran's Enrollment Report

Name _____ S.S.# _____
(Last) (First) (M.I.)

Street _____ City _____ Zip _____

Home Phone Number _____ Work Phone Number _____

VA File Number (if different than S.S.#) _____

Check as appropriate:

New Student Transfer Student (transferred from another college)
 Continuing Student Transient Student (seeking degree elsewhere)

What is your current major / program of study? _____
(you will be certified under the major currently in the system – it is your responsibility to officially change your major and inform the Office of Financial Aid of any change of major / program for VA purposes)

Are you currently attending another college? Yes No, Name of School _____

Current Registration Quarter (check one):

Summer Fall Winter Spring

Type of Educational Assistance Program (check one):

Chapter 30 (new GI Bill)
 Chapter 31 (disabled veterans)
 Chapter 35 (survivors and dependents)
 Chapter 1606 (selected reserve)

I verify that the courses for which I am registering are required for my declared major at COTC.

Veteran's Signature _____ Date _____

***Attach a current printout of your course schedule to this form.**

(This form must be submitted to the Office of Financial Aid in order for you to be certified to the VA)