CALIFORNIA STATE UNIVERSITY
FULLERTON

Veterans Resource Center Certification Request Form*

Gordon Hall 244 | (657) 278-2373
veterans@fullerton.edu

Term

Year: _____ Term: ☐ Fall ☐ Winter Intersession ☐ Spring ☐ Summer Session

Type of Benefits

Active Duty, Reservists, Veterans:

☐ Chapter 30: Montgomery G.I. Bill – Active Duty
☐ Chapter 31: Vocational Rehabilitation
☐ Chapter 33: Post 9/11 G.I. Bill, _____% Eligible
☐ Chapter 1606: Selected Reserve

Are you receiving Tuition Assistance? ☐ Yes ☐ No

Family Members:

☐ Chapter 33 TOE: Post 9/11 G.I. Bill, _____% Eligible
☐ Chapter 33: Fry Scholarship
☐ Chapter 35: Dependents Educational Assistance (DEA)

Are you receiving the CALVET Fee Waiver? ☐ Yes ☐ No

Personal Information

Last Name: _____ First Name: _____ Last 4 of SSN: _____ CWID: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone Number: _____ CSUF E-Mail Address: _____@csu.fullerton.edu

Note: The information submitted on this form must be the same as in your CSUF records. To check or update your information, go to your student portal.

Degree & Major Information

Major or Program: _____ Concentration: _____

Second Major and/or Minor: _____ Certificate/Credential Program: _____

Course Information

Course Name & Number (*Example: ENGL 100*)	**Type of Course**	**Number of Units**
	☐ In-Person ☐ Online ☐ Hybrid	
	☐ In-Person ☐ Online ☐ Hybrid	
	☐ In-Person ☐ Online ☐ Hybrid	
	☐ In-Person ☐ Online ☐ Hybrid	
	☐ In-Person ☐ Online ☐ Hybrid	
	☐ In-Person ☐ Online ☐ Hybrid	
	☐ In-Person ☐ Online ☐ Hybrid	
	☐ In-Person ☐ Online ☐ Hybrid	
	☐ In-Person ☐ Online ☐ Hybrid	

Important Reminders:

- You must reapply for benefits each term.
- You must notify our office of any changes to your schedule via Add/Drop Form.
- All classes must be towards an approved degree objective.

Signature: _____ Date: _____