

VA EDUCATION CERTIFICATION - CHANGE REQUEST FORM

Directions: Complete VA Change Request Form for any changes related to enrollment, academic information, and/or benefit type (chapter) made after initial certification. The below information will be used to make changes related to your VA education certification and kept on file with the UNT Dallas Office of the Registrar for official purposes. Failure to promptly disclose changes may result in certification delays and/or student debt to VA, UNT Dallas, or both. **This form is not an official UNT Dallas document to drop or add classes.** Initial Request for VA Certification should submit a VA Certification Request Form.

Name: _____ Student ID number: _____ UNTD Email: _____

Change(s) made: Drop/Add | Major/Minor/Cert Change | Undergraduate to Graduate | Change of Benefits

Drop/Add Class List

Year: _____ Fall Spring Summer

Drop	Add	Subject <i>EX: SOCI</i>	Course Number <i>EX: 1510</i>	Section Number <i>EX: 0001</i>	Course Title <i>EX: Introduction to Sociology</i>	Session <i>EX: 8W2</i>
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					

Reason for drop/withdraw: _____

Change of Major

Students changing majors and/or degree level pursued, must report the change of program to the VA by completing the appropriate [VA Form online](#). Proof of online VA form submission must be submitted along with this change form.

Current Academic Information:

Major: _____ Minor/Certificate: _____ Degree Type: Undergraduate Graduate

New/Updated Academic Information:

Major: _____ Minor/Certificate: _____ Degree Type: Undergraduate Graduate

Change in Benefits

Indicate below the current Veteran Benefit Type used in most recent certification, and which Benefit Type you are switching to. Students changing Benefit Type must submit all required documents on the [Required Documents Checklist](#) for First Semester under the new Benefit Type along with this change request.

Current Benefit Type: _____ Switching to: _____

(Exp. Ch. 30, 31, 33, 35, 1606, etc.)

VR&E Counselor's Name (Ch. 31 students): _____ Email: _____

Authorization Number (Ch. 31 students): _____

By signing below, you acknowledge the following:

I understand this form is to report the above change(s) have already occurred and is not a request to make the listed changes. I am responsible for submitting all required UNT Dallas Registrar and/or U.S. Department of Veteran Affairs forms pertaining to the above change(s), in accordance with university and VA policy.

Student Signature: _____ Date: _____