

Wis. Stats. Chapter 45

VETERANS EDUCATION GRANT APPLICATION

Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04(1)(m)].					
The provision of your social security number is voluntary. Failure to provide your social security number may result in an information processing delay.					
STUDENT INFORMATION					
WARNING: This application (form WDVA 2200) is due with stamped at either the Wisconsin Department of Veterans Affair office no later than 60 days after the start of the course, term, o			rs (WDVA) central officer semester for which re-	ce or in an authorized agent's	WDVA # County
forms must be date stamped electronically or physically at the time of submission.					
Name School					
Street City		 Stat	Social Sec # Zip	Telephone	(optional)
Approximate date that semester, term, or course started For this semester: Enrolled Credits					
FOR SCHOOL VETERANS' OFFICIAL USE ONLY					
Completed applications must be submitted to WDVA central office no later than 60 days following the last day of a course, term, or semester. A completed application has all of the following items filled in and is signed and dated by an authorized school official.					
Did the student have a Bachelors Degree or equivalent prior to the start of this course(s)? For Minnesota schools only: This student received a waiver of nonresident tuition at this institution under the Minnesota–Wisconsin Reciprocity Agreement. Yes No No					
Semester, term, or course start date Total credits for which enrolled Enrolled courses: All Tuition Costs \$ UWS and WTCS schools calculate equivalent tuition and fee remission under the WI GI Bill. (Other schools enter zero [0]). Tuition: \$ Fees (Segregated for UWS; Material for WTCS) \$ Total Under WI GI Bill. \$					
Did the student receive financial aid specifically for tuition from an employer, the federal government (Post-9/11 GI Bill), or other source? Yes No Service Amount \$ Amount \$ Service Amount \$					
I certify that the information provided above is accurate and correct.			SVO Signature	D	ate
COMMENTS					
Approval	Grant Amount	Voucher Date	Credit Bank Balance	Your 10–year Delimiting date is Your costs exceeded UW–M the same # of Credits	ladison's cost for