

# APPLICATION FOR VA EDUCATION BENEFITS (VA FORM 22-1990)

Use this form to apply for educational assistance under the following benefit programs:

- Post- 9/11 GI Bill chapter 33 of title 38, U.S. Code
- Montgomery GI Bill (MGIB) chapter 30 of title 38, U.S.Code
- Montgomery GI Bill Selected Reserve (MGIB-SR) chapter 1606 of title 10, U.S. Code
- Reserve Educational Assistance Program (REAP) chapter 1607 of title 10, U.S. Code
- Post-Vietnam Era Veterans' Educational Assistance Program (VEAP) chapter 32 of title 38, U.S. Code, or section 901 or section 903 of Public Law 96-342

## INFORMATION AND INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR VA EDUCATION BENEFITS

Do not use this form to apply for Vocational Rehabilitation and Employment benefits (chapter 31 of title 38, U.S. Code), Dependents Educational Assistance benefits (chapter 35 of title 38, U.S. Code), Transfer of Entitlement, or National Call to Service (section 510 of title 10, U.S. Code). These benefits require different application forms that can be completed on-line and printed at <a href="https://www.va.gov/vaforms">www.va.gov/vaforms</a> or can be obtained from the nearest VA regional office. They may also be available where you received this application.

INTERNET VERSION AVAILABLE - You may complete and submit this application on-line at <a href="www.gibill.va.gov">www.gibill.va.gov</a>. Click "Apply On Line" and select the "Education" option.

VA VOCATIONAL AND EDUCATIONAL COUNSELING HELP AVAILABLE - If you need help planning your individual educational and career goals, VA offers a wide range of counseling services to help you make these decisions. Services include educational and vocational guidance and such testing as necessary for you to develop a greater understanding of your skills, talents, and interests. For further information on VA counseling, call VA toll-free at 1-888-GI-BILL-1 (1-888-442-4551) or TDD at the Federal Relay, 711.

NOTE: The numbers on the instructions match the item numbers on the application. Items not mentioned are self-explanatory.

#### Part II

(This section provides an overview of the general eligibility requirements for various education programs. Additional requirements not listed on this form may be necessary.)

ITEM 7. The Department of Treasury requires all Federal benefit payments be made by electronic funds transfer (EFT), also called direct deposit (Direct Deposit is not available for Chapter 32 recipients.) Please attach a voided personal check or deposit slip or provide the information requested below to enroll in direct deposit. If you do not have a bank account, you must receive your payment through Direct Express Debit MasterCard. To request a Direct Express Debit MasterCard you must apply at <a href="https://www.usdirectexpress.com">www.usdirectexpress.com</a> or by telephone at 1-800-333-1795. If you elect not to enroll, you must contact representatives handling waiver requests for the Department of Treasury at 1-888-224-2950. They will address any questions or concerns you may have and encourage your participation in EFT.

**ITEM 9A.** You may be eligible for benefits under the Post-9/11 GI Bill, also referred to as chapter 33, if you served at least 90 aggregate days on active duty (excluding entry level and skill training) after September 10, 2001. You may also qualify if you were discharged due to a service-connected disability after serving at least 30 continuous days on active duty after September 10, 2001.

**ITEM 9B.** You may be eligible for the Montgomery GI Bill, also referred to as MGIB or chapter 30, if you served on active duty and meet certain conditions. NOTE: You do not have to be on active duty to apply for benefits under this program. You must meet any <u>one</u> of the following conditions (there are additional requirements):

You first entered service on or after July 1, 1985, and you didn't decline this benefit at your initial entry into service

OR

You entered service (or agreed to delayed entry) before January 1, 1977, and you have educational assistance entitlement remaining under the Vietnam Era GI Bill (also known as "chapter 34")

OR

You were voluntarily separated under the Voluntary Separation Incentive (VSI) or Special Separation Benefit (SSB) programs and had your military pay reduced by \$1,200

OR

You were involuntarily separated from active duty after February 2, 1991

OR

You were on active duty and a participant in the Post-Vietnam Era Veterans' Educational Assistance Program (VEAP) program on or before October 9, 1996, or you first entered the National Guard under title 32, U.S. Code, between July 1, 1985, and November 28, 1989, you elected chapter 30 benefits between October 9, 1996, and October 8, 1997, and you paid \$1,200

OR

You were on active duty and eligible for VEAP benefits on October 9, 1996, you elected chapter 30 benefits between November 1, 2000, and October 31, 2001, and you paid \$2,700.

**ITEM 9C.** You may be eligible for the Montgomery GI Bill - Selected Reserve Educational Assistance Program, also known as MGIB-SR or chapter 1606, if you are a member of the Selected Reserve and meet certain requirements, including a 6-year commitment. (The Departments of Defense and Homeland Security determine eligibility for this program.)

To expedite processing, attach a copy of your DD 2384, Selected Reserve Educational Assistance Program (GI BILL) Notice of Basic Eligibility. This form is also called a "NOBE." Your reserve unit should have issued this notice to you when you became eligible for the Montgomery GI Bill - Selected Reserve Educational Assistance Program. If you are unable to locate your copy, request a duplicate from your reserve unit.

**ITEM 9D.** You may be eligible for benefits under the Reserve Educational Assistance Program (REAP), also known as chapter 1607, if you are a member of the Ready Reserve and were called or ordered to active service to support a contingency operation for at least 90 consecutive days on or after September 11, 2001. (The Department of Defense and Homeland Security determine eligibility for this program.)

Attach a copy of any notice of eligibility to this program that you have received from your service component. Also, attach a copy of your orders showing you were called up to active service. If you do not have a copy of your orders, request a duplicate from your unit.

**ITEM 9E.** You may be eligible for benefits under the Post-Vietnam Era Veterans' Educational Assistance Program (VEAP), also known as Chapter 32, if your service began on or after January 1, 1977, and before July 1, 1985, and you contributed to a VEAP account.

You may be eligible for benefits under the Post-Vietnam Era Non-Contributory Veterans' Educational Assistance Program, also known as "Non-Contributory VEAP" or Section 903", if your service began on or after November 30, 1980, and before October 1, 1981, and your branch of service paid contributions into your VEAP account.

ITEM 9F. If you are eligible for MGIB, MGIB-SR, OR REAP, you must elect to give up eligibility under the program for which you are eligible in order to receive benefits under the Post-9/11 GI Bill (chapter 33). If you are eligible for more than one of the programs listed (MGIB, MGIB-SR, and REAP), you are only required to give up one of the programs for which you are eligible in order to receive benefits under the Post-9/11 GI Bill. You may not receive more than a total of 48 months of benefits under two or more programs. If you elect chapter 33 in lieu of chapter 30, your months of entitlement under chapter 33 will be limited to the number of months of entitlement remaining under chapter 30 on the effective date of your election. If you wish to elect to receive benefits under the Post-9/11 GI Bill, check the box next to the program (only check one box) you are giving up.

NOTE: An election to give up benefits under an existing program and receive benefits under the Post-9/11 GI Bill is <u>IRREVOCABLE</u>. You should carefully consider your decision before completing this section. If you need more information to make a choice, you should visit our at <u>www.gibill.va.gov</u> or call our toll-free customer service number at 1-888-GIBILL-1 (1-888-442-4551).

#### PART III

**ITEM 10A.** Self explanatory, except for the following items:

"Vocational Flight Training." You must already have a private pilot's license. If you are taking an Airline Transport Pilot course, you must have a valid first-class medical certificate on the date that you enter training. For all other flight courses, you must have a valid second-class medical certificate on the date that you enter training.

"National Test Reimbursement." You can be reimbursed for the cost of approved tests for admission to, or credit at, institutions of higher learning.

"Licensing or Certification Test Reimbursement." A licensing test is a test offered by a state, local, or federal agency that is required by law to practice an occupation. A certification test is a test designed to provide affirmation of an individual's qualifications in a specific occupation. Examples include EMT, CPA, MCSE, CCNP, etc.

"Tuition Assistance Top-Up" This benefit is payable only under MGIB and the Post-9/11 GI Bill programs. You can receive benefits to pay for the difference between what the military pays with Tuition Assistance (TA) and the total costs of these courses.

#### PART VIII

QUESTIONS ARE ONLY FOR APPLICANTS WHOSE SERVICE BEGAN BEFORE JANUARY 1, 1977, (or delayed entry before January 2, 1978). If you are currently married or if you have children under age 18 (under age 23 if in school), you should complete and return VA Form 21-686c. If your children are in school, you should also complete and return VA Form 21-674 for each child. If your parent(s) are dependent on you for financial support, you should complete and return VA Form 21-509. These forms may require additional documentation. VA cannot pay any additional benefits for dependents without properly completed forms and documentation. You can find VA forms 21-686c, 21-674, and 21-509 on-line at www.ya.gov/yaforms.

ITEM 23. If you are certifying that you are married for the purpose of VA benefits, your marriage must be recognized by the place where you and/or your spouse resided at the time of marriage, or where you and/or your spouse resided when you filed your claim (or a later date when you became eligible for benefits) (38 U.S.C. § 103(c)). Additional guidance on when VA recognizes marriages is available at <a href="www.va.gov/opa/marriage/">www.va.gov/opa/marriage/</a>.

### ADDITIONAL HELP

If you need more help in completing this application, call VA TOLL FREE at 1-888-GI-BILL-1 (1-888-442-4551). If you use the Telecommunications Device for the Deaf (TDD), the Federal Relay number is 711. You can also get education assistance after normal business hours at our education Internet site www.gibill.va.gov.

## HOW TO FILE YOUR CLAIM

Be sure to do the following:

#### (A) If you have selected a school or training establishment:

Step 1: Mail the completed application to the VA Regional Processing Office for the region of that school's physical address. See next page for the addresses of these VA Regional Processing Offices.

- Step 2: Tell the veterans certifying official at your school or training establishment that you have applied for VA education benefits. Ask him or her to send your enrollment information using VA Form 22-1999, Enrollment Certification, or its electronic version.
- Step 3: Wait for VA to process your application and notify you of its decision concerning your eligibility for education benefits.

#### (B) If you haven't selected a school or training establishment:

Step 1: Mail the completed application to the VA Regional Processing Office for the region of your home address. See next page for the addresses of these VA Regional Processing Offices.

Step 2: Wait for VA to process your application and notify you of its decision concerning your eligibility for education benefits.

Eastern Region: VA Regional Office P. O. Box 4616 Buffalo, NY 14240-4616				
SERVES THE FOLLOWING STATES				
CT	DE	DC	ME	
MD	MA	NH	NJ	
NY	PA	RI	VT	
VA	Foreign Schools			

Central Region: VA Regional Office P. O. Box 66830 St. Louis, MO 63166-6830 SERVES THE FOLLOWING STATES				
СО	IA	IL	IN	
KS	KY	MI	MN	
МО	MT	NE	ND	
ОН	SD	TN	WV	
WI	WY			

Southern Region: VA Regional Office P. O. Box 100022 Decatur, GA 30031-7022				
SERVES THE FOLLOWING STATES				
GA NC PR US Virgin Islands				
APO/FPO AA				

Western Region: VA Regional Office P. O. Box 8888 Muskogee, OK 74402-8888				
SERVES THE FOLLOWING STATES				
AK	AL	AR	AZ	
CA	FL	НІ	ID	
LA	MS	NM	NV	
OK	OR	SC	TX	
UT	WA	Philippines	Guam	
APO/FPO AP				

Privacy Act Notice: The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or title 38, Code of Federal Regulations, section 1.576 for routine uses (e.g., VA sends educational forms or letters with a veteran's identifying information to the veteran's school or training establishment to (1) assist the veteran in the completion of claims forms or (2) for the VA to obtain further information as may be necessary from the school for the VA to properly process the veteran's education claim or to monitor his or her progress during training) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, and published in the Federal Register. Your obligation to respond is required to obtain or retain education benefits. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by a Federal Statute of law enacted before January 1, 1975, and still in effect. The requested information is considered relevant and necessary to determine the maximum benefits under the law. While you do not have to respond, VA cannot process your claim for education assistance unless the information is furnished as required by existing law (38 U.S.C. 3471). The responses you submit are considered confidential (38 U.S.C. 5701). Any information provided by applicants, recipients, and others may be subject to verification through computer matching programs with other agencies.

**Respondent Burden**: We need this information to determine your eligibility for education benefits (38 U.S.C. 3471). Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 15 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB (Office of Management and Budget) control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at <a href="www.reginfo.gov/public/do/PRAMain">www.reginfo.gov/public/do/PRAMain</a>. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

OMB Control No. 2900-0154 Respondent Burden: 15 minutes Expiration Date: 10/31/2017

Department of Veterans Affai	,			
INTERNET VERSION AVAILABLE - You may complete and send your application over the Internet at: www.gibill.va.gov				
	PART I - APPLICANT INF	ORMATION		
1. SOCIAL SECURITY NUMBER OF APPLICANT	2. SEX OF APPLICANT		CANT'S DATE O	
	MALE FEM	ALE Month	_ Day _	Year
4. NAME (First, Middle Initial, Last)	<u>.</u>	•		
5. APPLICANT'S ADDRESS				
Number and Street				
	The second secon	pt./Unit Number		7
City, State, ZIP Code				
6A. APPLICANT'S TELEPHONE NUMBERS (Include Area	ode)			
Primary:	Secondary:			
6B. APPLICANT'S E-MAIL ADDRESS (If applicable)				
7. DIRECT DEPOSIT (Attach a voided personal check or pro Deposit information.)	e the following information. Direct Depos	sit is not available for Cha	apter 32 recipients.	See instructions for additional Direct
Routing or Transit Number	Account Type	Α	Account Numbe	<b>Э</b> Г
Che	ing Savings			
8. PLEASE PROVIDE THE NAME, ADDRESS	ND PHONE NUMBER OF SOMEON	E WHO WILL ALWAYS	KNOW WHERE	YOU CAN BE REACHED
A. NAME	B. ADDR	ESS		C. PHONE NUMBER
PART II - EDUCATION BE	EFIT BEING APPLIED FO	R (See instructions	for benefit elig	gibility criteria)
9A. Chapter 33 - Post-9/11 GI Bill (Complete 9	.,	apter 1606, or chapter	1607)	
9B. Chapter 30 - Montgomery GI Bill Education  9C. Chapter 1606 - Montgomery GI Bill - Sele		oo Program (MCIP S	(P)	
9D. Chapter 1607 - Reserve Educational Ass		ce Program (MG1B-S	ok)	
9E. Chapter 32 or Section 903 - Post-Vietnan		nce Program (VEAP)	)	
<ul> <li>9F. By electing Chapter 33, I acknowledge th</li> <li>I may not receive more than a total of 48 i</li> <li>If electing chapter 33 in lieu of chapter 30 months of entitlement remaining under ch</li> <li>My election is <i>irrevocable</i> and may not b</li> </ul>	onths of benefits under two or mon my months of entitlement under ch ter 30 on the effective date of my	apter 33 will be limite	ed to the numb	er of
I elect to receive chapter 33 education benefits in lieu of the education benefit checked below, effective  I understand that my election is irrevocable and may not be changed. (Check only one)  (date)				
Chapter 30 - Montgomery GI Bill Edu	itional Assistance Program (MGI)	3)		
☐ Chapter 1606 - Montgomery GI Bill - Selected Reserve Educational Assistance Program (MGIB-SR) ☐ Chapter 1607 - Reserve Educational Assistance Program (REAP)				
PART III - TYPE AND PROG	AM OF EDUCATION OR	TRAINING		VA DATE STAMP
10A. TYPE OF EDUCATION OR TRAINING (See instruction of the college or other school (Including on-line of the college or other school (Including on-line of the college or other school)  NATIONAL TEST REIMBURSEMENT (SAT, CLEP, LICENSING OR CERTIFICATION TEST REIMBUR (MCSE, CCNA, EMT, NCLEX, ETC.)	for additional information)  rses)	OR ON-THE-JOB CE ICE TOP-UP		Do Not Write In This Space)

		3001	AL SECURITIN	OWIDER OF AFFLICANT	
	ULL NAME AND ADDR eimbursement, or Tuition	ESS OF THE SCHOOL, IF KNOWN (Si Assistance Top-Up)	ip this item if you o	are only applying for Nation	nal Test Reimbursement, Licensing and
10C PLEASE SPECIE	Y YOUR EDUCATION	AL OR CAREER OBJECTIVE, IF KNOW	MN (a.a. Rachalor	of Arts in Accounting woldi	na cartificata, polica officar, etc.)
TUC. PLEASE SPECIF	Y YOUR EDUCATION	L OR CAREER OBJECTIVE, IF KNOW	VN (e.g. Bachelor (	oj Arts in Accounting, weiai.	ng certificate, police officer, etc.)
		PART IV - SERV	CE INFORM	MATION	
<ul><li>DD Form 214 (</li><li>DD Form 2384</li><li>Copies of order</li></ul>	Member 4) for all p , Notice of Basic Eli rs if activated from t		uding active du hapter 1606		
11. ARE YOU NOW OF		ot check "Yes" if you are currently on drill	ing status in the the	e Selected Reserve, or if you	are on active duty for training)
12. ARE YOU NOW OF		JST BEFORE DISCHARGE? of your DD Form 214 (Member 4) when is.	cued)		
	13. PLEAS	SE COMPLETE THE FOLLOWING	FOR EACH P	ERIOD OF MILITARY	SERVICE
A. DATE ENTERED	B. DATE SEPARATE	USAF, USAR, ARNG, ETC.)	drilling	EE STATUS (Active duty, g reservist, IRR, etc.)	E. WERE YOU INVOLUNTARILY CALLED TO ACTIVE DUTY FOR THIS PERIOD?
9/26/2000	9/24/2004	USMC (EXAM	IPLE) AC	TIVE DUTY	NO
1/18/2005	8/14/2007	USMCR	D	RILLING	N/A
8/15/2007	Present	USMC	AC	TIVE DUTY	YES
	P.A	RT V - EDUCATION AND	 EMPLOYME	ENT INFORMATION	 ON
		PLOMA OR HIGH SCHOOL	14B. DO YO		SHT CERTIFICATES? (If "Yes," specify each
	14C. EDUCATION	ON AFTER HIGH SCHOOL (Includ	ing apprenticesh	ip, on-the-job training, a	and flight training)
NAME AND LOCATIO OR OTHER TRAINII		OF OF	R AND TYPE HOURS Quarter, or Clock)	DEGREE, DIPLOMA, OR CERTIFICATE RECEIVED	MAJOR FIELD OR COURSE OF STUDY
				1	<u> </u>

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	SOCIAL SEC	URITY NUMBER OF APPLICANT	
1	4D. EMPLOYMENT (Only complete if you held a license	e or journeyman rating to practice a	profession)
EMPLOYMENT	PRINCIPAL OCCUPATION	NUMBERS OF MONTHS WORKED	LICENSE OR RATING
BEFORE MILITARY SERVICE			
AFTER MILITARY SERVICE			
PART	VI - ENTITLEMENT TO AND USAGE OF	ADDITIONAL TYPES OF	ASSISTANCE
BENEFITS? IF "YES," IT WIL	L CONTRIBUTIONS (UP TO \$600.00) TO INCREASE THE LL HELP VA PROCESS YOUR CLAIM IF YOU SUBMIT AN g., cash collection voucher, leave and earnings statement(s), receig	Y EVIDENCE YOU HAVE TO	YES NO
(Kickers are additional amoun	ICKER (sometimes called a "College Fund") BASED ON YO nts contributed by DOD to an education fund). If you qualify funit a copy of the kicker contract. Reserve kicker contracts m	or a kicker, it will help VA	ACTIVE DUTY KICKER  YES NO  RESERVE KICKER  YES NO
17. IF YOU GRADUATED FROM RECEIVED YOUR COMMIS	I A MILITARY SERVICE ACADEMY, SPECIFY THE YEAR 'SION.	OU GRADUATED AND	Graduation Year
If you received your commiss	D AS THE RESULT OF A SENIOR ROTC (Reserve Officers ion through a non-scholarship program, check "No." If "Yes, of your scholarship for each school year you were in the Senowance (stipend).	provide the date of your	YES NO
Scholarship Amounts:			Date of Commission
Year:	Amount:		
	RTICIPATING IN A SENIOR ROTC SCHOLARSHIP PROGR ID SUPPLIES UNDER SECTION 2107 OF TITLE 10, U.S. C		YES NO
REPAYING AN EDUCATION	ACTIVE DUTY THAT THE DEPARTMENT OF DEFENSE C I LOAN, CHECK "YES". SHOW THE PERIOD OF ACTIVE D ED FOR THE PURPOSES OF REPAYING THIS EDUCATIO	OUTY THAT THE MILITARY	YES NO
(INCLUDING BUT NOT LIMI HEALTH SERVICE FOR THI YOU RECEIVE SUCH BENE	ANTS ONLY: ARE YOU RECEIVING, OR DO YOU ANTICIP TED TO FEDERAL TUITION ASSISTANCE) FROM THE AF E COURSE FOR WHICH YOU HAVE APPLIED TO THE VA FITS DURING ANY PART OF YOUR TRAINING, CHECK " SSISTANCE TOP-UP, CHECK NO IN THIS ITEM.	MED FORCES OR PUBLIC FOR EDUCATION BENEFITS? IF	YES NO
RECEIVING, ANY MONEY (I FROM YOUR AGENCY FOR	OF THE U.S. GOVERNMENT ONLY: ARE YOU RECEIVIN INCLUDING, BUT NOT LIMITED TO, THE GOVERNMENT I R THE SAME PERIOD FOR WHICH YOU HAVE APPLIED T ECFIVE SLICH RENEFITS DURING ANY PART OF YOUR	EMPLOYEES TRAINING ACT) O THE VA FOR EDUCATION	YES NO

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SOCIAL SECURITY NUMBER OF APPLICANT	
PART VII - INFORMATION ON VA EDUCATION BENEFITS	
NOTE: The most current information on VA education benefits is available online at <a href="www.gibill.va.gov">www.gibill.va.gov</a> If you would like to receive a printed pamphlet check here.	
PART VIII - MARITAL AND DEPENDENCY STATUS	
NOTE: Only complete this section if you have military service before January 1, 1977 (or delayed entry before January	ary 2, 1978). See instructions.
23. ARE YOU MARRIED?	
YES NO	
24. DO YOU HAVE ANY CHILDREN WHO ARE UNDER AGE 18, <b>OR</b> OVER 18 BUT UNDER AGE 23, NOT MARRIED AND ATTENDI PERMANENTLY HELPLESS FOR MENTAL OR PHYSICAL REASONS?	NG SCHOOL, <i>OR</i> OF ANY AGE
☐ YES ☐ NO	
25. DO YOU HAVE A PARENT WHO IS DEPENDENT UPON YOU FOR FINANCIAL SUPPORT?  YES NO	
PART IX - REMARKS	
(If more space is needed, please attach a separate sheet of paper. Be sure to include your name and social security	number on each sheet)
APPLICATION SUBMISSION REMINDERS	
Did you remember to	
<ul> <li>Write your social security number on each page?</li> <li>Write your complete mailing address?</li> <li>Attach all supporting documents (e.g. voided check, orders, DD214, kicker contract, NOBE, cash collections)</li> </ul>	ion voucher, etc.)?
IF SO, PLEASE SIGN AND DATE THE APPLICATION BELOW	
PART X - CERTIFICATION AND SIGNATURE OF APPLICANT	
I CERTIFY THAT all statements in my application are true and correct to the best of my knowledge and belief. If or have consulted with an Education Service Officer (ESO) regarding my education program.	active duty, I also certify that I
<b>PENALTY</b> - Willful false statements as to a material fact in a claim for education benefits is a punishable offense at these or other benefits and in criminal penalties.	
26A. SIGNATURE OF APPLICANT ( <u>DO NOT PRINT</u> )	26B. DATE SIGNED

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