

**Central Ohio Technical College  
Veteran's Enrollment Report**

Name \_\_\_\_\_ S.S.# \_\_\_\_\_  
(Last) (First) (M.I.)

Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

VA File Number (if different than S.S.#) \_\_\_\_\_

\*\*Date you submitted the VA Application online (or paper form/22-1990/22-5490/22-1990E) to the VA:

\_\_\_\_\_

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 Semester (check one):

Summer       Fall       Spring

Type of Educational Assistance Program (check one):

Chapter 30 ( GI Bill®)                 Chapter 33 (Post 9/11)  
 Chapter 31 (disabled veterans)       Chapter 35 (survivors and dependents)  
 Chapter 1606 (selected reserve)       Chapter 1607 (REAP)

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

Veteran/Dependent

Signature \_\_\_\_\_ Date \_\_\_\_\_