

RIT | Office of Financial Aid and Scholarships

56 Lomb Memorial Drive • Rochester, New York 14623
(585) 475-2186
E-mail: RITaid@RIT.edu

2024-2025 VA Benefit Worksheet

Student Name: _____

University ID: _____

Degree Program: _____

Undergraduate

Graduate

Has your RIT degree program changed within the last year?

Yes

No

BENEFIT INFORMATION

Did you receive VA benefits at another college?

Yes*

No

*If yes and you are using your benefit at RIT for the first time please submit VA form 22-1995 or 22-5495 and list your previous college: _____

I am the:

Veteran

Active Duty

Dependent

Reserves/National Guard

I am eligible for the following benefit (chose ONE):

Post 9/11 GI Bill® 100%

Post 9/11 GI Bill® non-100%

Chapter 30 (MGIB)

Chapter 31 (VR&E)

Chapter 1606 (Reservist/National Guard)

Chapter 35 (DEA)*

*Name & social security number of Veteran parent (Chap 35 Only): _____

ENROLLMENT PLANS:

Fall 2024: *Full time* *Part Time* *Co-Op**

Spring 2025: *Full time* *Part Time* *Co-Op**

Summer 2025: *Full time* *Part Time* *Co-Op**

*Students who are registered for co-op programs, graduate thesis courses, or other coursework assigned 0 credit hours are **not** eligible for tuition benefits for those classes or during periods of co-op.

REVIEW AND SIGN

Important Information: RIT will only certify your eligibility for VA benefits for coursework applicable to your program of study (including electives). Any changes in course registration and/or number of credits you are taking must be reported to the Office of Veteran Student Success and may result in a debt owed to the VA and/or a balance due to RIT. Other forms of financial aid (including RIT merit-based and need-based awards) are subject to change based on VA benefits.

Student Signature: _____

Date _____

If you have any questions, please do not hesitate to contact us.

Please upload this form and documentation, if applicable to www.rit.edu/aid/upload or email to cevvss@rit.edu.