

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 903 of Public Law 96-342

INFORMATION AND INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR VA EDUCATION BENEFITS

Do <u>not</u> 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 www.va.gov/vaforms 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 www.gibill.va.gov. 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 (800) 829-4833.

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 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,

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 one 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

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

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

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. However, if you completely exhaust your entitlement under chapter 30 before the effective date of your chapter 33 election, you may receive up to 12 additional months of benefits under chapter 33. 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 IRREVOCABLE. You should carefully consider your decision before completing this section. If you need more information to make a choice, you should visit our website at www.gibill.va.gov 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 you 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.va.gov/vaforms.

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 are hearing impaired, call us toll-free at 1-800-829-4833. 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 OH PA RI

VA

VT

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		
MO	MT	NE	ND		
SD	TN	WI	WY		

WV

Foreign Schools

	Western I VA Regio P. O. Bo Muskogee, Ol	nal Office ox 8888	
	Serves the fol	lowing states:	•
AK	AR	AZ	CA .
HI	ID .	LA	NM
NV	OK	OR	PHILIPPINES
TX	UT	WA	GUAM

	Southern I VA Region P. O. Box Decatur, GA	nal Office 100022 30031-7022	
	Serves the foll	owing states.	
AL	FL FL	GA	MS.
NC	PR	SC	US Virgin Islands
	APO/FF	PO AA	

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 www.whitehouse.gov/omb/library/OMBINV.VA.EPA.html#VA. 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

Department of Veterans Affairs	APPLICATION FOR VA EDUCATION BENEFITS (See attached Information and Instructions)			
INTERNET VERSION AVAILABLE - You may complete and send your application over the Internet at: www.gibill.va.gov				
	PART I - APPLICANT INFORMATION			
1. SOCIAL SECURITY NUMBER OF APPLICANT — — — — — — — — — — — — — — — — — — —	2. SEX OF APPLICANT 3. APPLICANT'S D. Month MALE FEMALE	ATE OF BIRTH Day Year —		
4. NAME (First, Middle Initial, Last)				
5. APPLICANT'S ADDRESS				
Number and Street				
	Apt./Unit Numbe	er		
City, State, ZIP Code				
6A. APPLICANT'S TELEPHONE NUMBERS (Include Area	a Code) Secondary:			
6B. APPLICANT'S E-MAIL ADDRESS (If applicable)				
7. DIRECT DEPOSIT (Attach a voided personal check of	r provide the following information. Direct Deposit is not available for V	/EAP)		
Routing or Transit Number	Account Type Account Number Scking Savings			
L Crie	Carling Savings			
8. PLEASE PROVIDE THE NAME, ADDRESS,	AND PHONE NUMBER OF SOMEONE WHO WILL ALWAYS KNOW WI	HERE YOU CAN BE REACHED		
A. NAME	B. ADDRESS	C. PHONE NUMBER		
	IT BEING APPLIED FOR - See instructions for bene			
	e 9F if you are eligible for chapter 30, chapter 1606, or chapte	er 1607)		
9B. Chapter 30 - Montgomery GI Bill Educat	lected Reserve Educational Assistance Program (MGIB-SR)			
9D. Chapter 1607 - Reserve Educational As				
	am Era Veterans' Educational Assistance Program (VEAP)			
	is is your first request for chapter 33 and you are eligible for o	ne of the benefits listed below)		
 By electing Chapter 33, I acknowledge that I understand the following: I may not receive more than a total of 48 months of benefits under two or more programs. If electing chapter 33 in lieu of chapter 30, my 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 my election. However, if I completely exhaust my entitlement under chapter 30 before the effective date of my chapter 33 election, I may receive up to 12 additional months of benefits under chapter 33. My election is <u>irrevocable</u> and may not be changed. 				
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)				
Chapter 30 - Montgomery GI Bill	Educational Assistance Program (MGIB)			
Chapter 1606 - Montgomery GI	Bill - Selected Reserve Educational Assistance Program (MGIB-	SR)		
Chapter 1607 - Reserve Educational Assistance Program (REAP)				
	RAM OF EDUCATION OR TRAINING	VA DATE STAMP		
10A. TYPE OF EDUCATION OR TRAINING (See instruct COLLEGE OR OTHER SCHOOL (Including on-line of VOCATIONAL FLIGHT TRAINING NATIONAL TEST REIMBURSEMENT (SAT, CLEP, E LICENSING OR CERTIFICATION TEST REIMBURSE (MCSE, CCNA, EMT, NCLEX, ETC.)	ions for additional information) ourses)	(Do Not Write In This Space)		

SOCIAL SECURITY NUMBER OF APPLICANT	

10B. PROVIDE THE FU and Certification 1					p this item if y	ou are only applying for	r National Test Reimbursement, Licensing
10C. PLEASE SPECIFY	YOUR EDUCATION	NAL OR CARE	ER OBJECTIV	E, IF KNOWN (6	e.g. Bachelor	of Arts in Accounting, v	welding certificate, police officer, etc.)
			PART IV	/ - SERVIC	E INFORM	MATION	
• DD Form 2384	'A process your (Member 4) for 4, Notice of Bas ers if activated f	all periods of sic Eligibility (N	send a copy active duty NOBE) if app	of the following service	ing:		
11. ARE YOU NOW ON are on active dut		(Do not check	'Yes" if you a	are currently on	drilling status	s in the the Selected Re	serve, or if you
12. ARE YOU NOW ON	N TERMINAL LEA	VE JUST BEFOF	RE DISCHARG	Œ?			
☐yes ☐no	(Please provid	de a copy of y	our DD Forr	m 214 (Memb	per 4) when	issued)	
	13. F	LEASE COMF	LETE THE F	OLLOWING F	OR EACH P	ERIOD OF MILITARY	SERVICE
A. DATE ENTERED	B. DATE SEPARA		RVICE COMPC AF, USAR, AR		drilling r	STATUS (Active duty, eservist, IRR, etc.)	E. WERE YOU INVOLUNTARILY CALLED TO ACTIVE DUTY FOR THIS PERIOD?
9/26/2000	9/24/200)4	USMO	c (EXAM	PLE) AC	TIVE DUTY	NO
1/18/2005	8/14/200)7	USMC	;R	E	PRILLING	N/A
8/15/2007	Present		USMO	5	AC*	TIVE DUTY	YES
	<u> </u>						
14A. DID YOU RECEIV EQUIVALENCY CE	/E A HIGH SCHOO	OL DIPLOMA OF	R HIGH SCHO		14B. DO YO	ENT INFORMATION HOLD ANY FAA FLIG ate in Part IX, Remarks)	ON . GHT CERTIFICATES? (If "Yes," specify each
YES DATE:			_ 🔲 NO		YES	□no	
	14C. EDUCATI	ON AFTER HI	GH SCHOO	L (Including a	pprenticeshi	p, on-the-job training,	, and flight training)
		NUMBER AN HOURS (S Quarter, o	Semester,	DEGREE, DIPLOMA, OR CERTIFICATE RECEIVED	MAJOR FIELD OR COURSE OF STUDY		
							_
						_	

SOCIAL SECURITY NUMBER OF APPLICANT

14D.	EMPLOYMENT (Only complete if you held a licens	e or journeyman rating to practi	ce a professior	n)	
EMPLOYMENT	PRINCIPAL OCCUPATION	NUMBERS OF MONTHS WORKED	LICE	SE OR RATING	 G
BEFORE MILITARY SERVICE					
AFTER MILITARY SERVICE					
PART	VI - ENTITLEMENT TO AND USAGE OF	ADDITIONAL TYPES OF	ASSISTAN	CE	
BENEFITS? IF "YES," IT WII	AL CONTRIBUTIONS (UP TO \$600.00) TO INCREASE TH LL HELP VA PROCESS YOUR CLAIM IF YOU SUBMIT AN g., cash collection voucher, leave and earnings statemer	IY EVIDENCE YOU HAVE TO	☐ YES	□ no	
(Kickers are additional amo VA process your claim if your amount and effective date	CICKER (sometimes called a "College Fund") BASED ON bunts contributed by DOD to an education fund). If you contributed by DOD to an education fund). If you contributed by DOD to an education fund). If you contributed by State of the kicker contract. Reserve kicker and AMILITARY SERVICE ACADEMY, SPECIFY THE YEAR	qualify for a kicker, it will help contracts must include the	ACTIVE DUT YES RESERVE KII YES Graduation Yes	NO CKER NO	
RECEIVED YOUR COMMISS		TOO GRADOATED AND	Graduation	ai	
18. WERE YOU COMMISSIONE SCHOLARSHIP? If you red "Yes," provide the date of	DO AS THE RESULT OF A SENIOR ROTC (Reserve Office eleved your commission through a non-scholarship progra- your commission and the amount of your scholarship for rogram. Don't report your monthly subsistence allowand	am, check "No." If or each school year you	☐ YES	□ NO	
Scholarship Amounts:	Amount:		Date of Con	nmission	
Year:	Amount:		,		
·Year:	Amount:				
Year:	Amount:		,		
Year:	Amount:				
	TICIPATING IN A SENIOR ROTC SCHOLARSHIP PROGRAD SUPPLIES UNDER SECTION 2107 OF TITLE 10, U.S. C	*	☐ YES	□ NO	
REPAYING AN EDUCATION	ACTIVE DUTY THAT THE DEPARTMENT OF DEFENSE O LOAN, CHECK "YES". SHOW THE PERIOD OF ACTIVE I D FOR THE PURPOSES OF REPAYING THIS EDUCATION	OUTY THAT THE MILITARY	☐ YES	□ NO	
(INCLUDING BUT NOT LIMI' HEALTH SERVICE FOR THE IF YOU RECEIVE SUCH BEN	INTS ONLY: ARE YOU RECEIVING, OR DO YOU ANTICIF TED TO FEDERAL TUITION ASSISTANCE) FROM THE AF COURSE FOR WHICH YOU HAVE APPLIED TO THE VA JEFITS DURING ANY PART OF YOUR TRAINING, CHECK ION ASSISTANCE TOP-UP, CHECK NO IN THIS ITEM.	RMED FORCES OR PUBLIC FOR EDUCATION BENEFITS?	☐ 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 THE SAME PERIOD FOR WHICH YOU HAVE APPLIED TO ECEIVE SUCH BENEFITS DURING ANY PART OF YOUR T	EMPLOYEES TRAINING ACT) O THE VA FOR EDUCATION	☐ YES	□ NO	

VA FORM 22-1990, MAY 2009

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 www.gibill.va.gov If you would like to receive a printed pamphlet check here.				
PART VIII - MARITAL AND DEPENDENCY STATUS				

NOTE: The most current information on VA education benefits is available online at www.gibill.va.gov 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 2, 1978).	See instructions.
22. ARE YOU MARRIED?	
☐ YES ☐ NO	
23. DO YOU HAVE ANY CHILDREN WHO ARE UNDER AGE 18, <i>OR</i> OVER 18 BUT UNDER AGE 23, NOT MARRIED AND ATTENDING SCHOOL, <i>OR</i> ANY AGE PERMANENTLY HELPLESS FOR MENTAL OR PHYSICAL REASONS?	₹ OF
YES NO	
24. 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 o	n each sheet)
The motor opage to married and a separate states of page 1971.	11 0,000
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APPLICATION SUBMISSION REMINDERS	
Did you remember to	
 Write your social security number on each page? 	-
Write your complete mailing address?	
 Attach all supporting documents (e.g. voided check, orders, DD214, kicker contract, NOBE, collection voucher, etc.)? 	ash
IF SO, PLEASE SIGN AND DATE THE APPLICATION BELOW	
DADT V CERTIFICATION AND CICNATURE OF ARRUGANT	
PART X - CERTIFICATION AND SIGNATURE OF APPLICANT	to a constant
I CERTIFY THAT all statements in my application are true and correct to the best of my knowledge and belief. If on active duty, I that I have consulted with an Education Service Officer (ESO) regarding my education program.	
PENALTY - Willful false statements as to a material fact in a claim for education benefits is a punishable offense and may result it	n the
forfeiture of these or other benefits and in criminal penalties. 25A. SIGNATURE OF APPLICANT (DO NOT PRINT) 25B. DATE SIGNE	-n
25A. SIGNATURE OF AFFECTIVE (150 NOT TRINT)	.0

VA FORM 22-1990, MAY 2009