

# VETERANS INFORMATION SHEET

## MORRIS COLLEGE SUMTER, SOUTH CAROLINA

Name: \_\_\_\_\_ VA File No. \_\_\_\_\_

Please check one: \_\_\_\_\_ Veteran \_\_\_\_\_ Dependent

If a NEW VETERAN, please present a copy of your DD 214, Application for Benefits (Certificate of eligibility for Chapter 33 Veterans).

Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Student Identification Number \_\_\_\_\_

Current Address \_\_\_\_\_  
Street City State Zip Code

Telephone No. \_\_\_\_\_ Cell No. \_\_\_\_\_ Business No. \_\_\_\_\_

Is this a change of or degree from your last VA check? \_\_\_\_\_ Yes \_\_\_\_\_ No

Degree enrolled for Bachelor of \_\_\_\_\_ Major \_\_\_\_\_  
(Arts, Science, Science in Education, Fine Arts)

Is this a change of major or degree from your last enrollment? \_\_\_\_\_ Yes \_\_\_\_\_ No

What is your anticipated graduation date? \_\_\_\_\_

Are you on active duty?..... \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you a transfer student?..... \_\_\_\_\_ Yes \_\_\_\_\_ No

Will you attend: (Check one) \_\_\_\_\_ Regular School Year and Summer School.  
\_\_\_\_\_ Regular School Year Only.

PROPOSED SCHEDULE FOR SCHOOL YEAR (PLEASE PLACE NUMBER OF HOURS ON EACH LINE.)

FALL \_\_\_\_\_:\_\_\_\_\_ HRS. SUMMER \_\_\_\_\_:\_\_\_\_\_ HRS.  
SPRING \_\_\_\_\_:\_\_\_\_\_ HRS.

ALL VETERANS AND OTHERS WHO RECEIVE BENEFITS FROM THE VETERANS ADMINISTRATION ARE RESPONSIBLE FOR INFORMING THE ADMISSIONS AND RECORDS OFFICE OF ANY CHANGE IN ENROLLMENT.

I declare that the above statements are true and that I will notify the Admissions and Records Office immediately upon any changes in my proposed schedule.

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