

Veteran Benefit Responsibility

Recipients of Chapters: 30, 31, 32, 33, 34, 35, 1606, 1607

STUDENT INFORMATION

Student Name _____ AU Student ID _____

I understand that I may not claim benefits for:

- ◆ Failing to attend class regularly.
- ◆ Auditing a course.
- ◆ Any course not specifically required for completion of my degree program or specific course of study.
- ◆ Continuing education courses or any course in which no credit is granted toward my degree.
- ◆ Repeating a course in which a passing grade of A, B, C, or D has been received, unless the grade received does not meet program requirements.
- ◆ Any course in which a non-punitive grade (W or I) is received. The Department of Veteran Affairs' ruling on non-punitive grades is that anyone receiving a non-punitive grade while using veteran benefits may be required to make a partial or complete repayment of educational benefits for the semester.

I agree to provide the following information to the Office of Financial Aid:

- ◆ Changes in my degree objective or program of study
- ◆ Changes in the courses I'm taking during any given semester
- ◆ Changes in the type of VA benefits I will be receiving

Any overpayment incurred because of a failure to report the above information to the Department of Veteran Affairs and/or the Office of Financial Aid will be the sole liability of the undersigned. Any changes in the above items will be reported to the Department of Veteran Affairs promptly.

I have read and understand the above statements and agree to comply with them.

Student Signature → **Must be drawn and not typed.** _____ Date

To return this form: Secure Document Uploader: aurora.edu/submitfinaidforms

Fax: 630-844-6191 | Mail: Office of Financial Aid, 347 S Gladstone Ave, Aurora, IL 60506 | In Person: Eckhart Hall, Room 324

Questions: Email: finaid@aurora.edu | Phone: 630-844-6190

Note: Documents submitted via email cannot be accepted due to security reasons.