



Registration Card

SEMESTER _____

Check here if you have previously submitted this card for the term listed above.

NAME: _____

Chapter: _____

Last

First

MI

Enrollment Status:

- Full-Time (12 Units)
- ¾ Time (9-11 Units)
- ½ Time (6-8 Units)
- Less than ½ (5 units)
- ¼ time (4 Units or less)

Student Identification Number: _____ - _____ - _____

Must be ENROLLED in 6.5 UNITS or MORE to RECEIVE BENEFITS!

Instructions: Complete this card each semester that you would like to have your enrollment to be certified to the VA. Enrollment certification will not be processed without the student's request. **NOTE: It is the student's responsibility to notify the VSC when an enrollment status occurs and/or any changes to schedule.**

DATE: _____

SIGNATURE: _____



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