

APPLICANTS:

PLEASE COMPLETE THE FOLLOWING QUESTIONNAIRE SO THAT WE MAY ASSIST YOU IN
APPLYING FOR YOUR VETERANS ADMINISTRATION BENEFITS.

ARE YOU A VETERAN?

SERVICE DATES: FROM _____ TO _____

BRANCH OF SERVICE _____

WERE YOU INJURED WHILE YOU WERE IN THE SERVICE? _____

DID YOU CONTRIBUTE TO THE GI BILL? _____

DO YOU HAVE ANY "KICKERS"? _____

DO YOU HAVE MILITARY TRAINING FOR WHICH YOU CAN BY-PASS TEST? _____

HAVE YOU USED THESE BENEFITS BEFORE? _____

ARE YOU A RESERVIST OR NATIONAL GUARD MEMBER?

ARE YOU ELIGIBLE FOR THE RESERVES/NATIONAL GUARD GI BILL? _____

DO YOU HAVE ANY "KICKERS"? _____

ARE YOU ELIGIBLE FOR THE TUITION ASSISTANCE PROGRAM? _____

HAVE YOU USED THESE BENEFITS BEFORE? _____