### SHIPPENSBURG UNIVERSITY, DEPARTMENT OF VETERANS BENEFITS

### SUMMER B 2024 APPLICATION FOR FEDERAL TUITION ASSISTANCE (FTA)

### FORM MUST BE SUBMITTED TO VETAFFAIRS@SHIP.EDU OR DELIVERED TO MOWREY HALL 207.

# Important Note: You must initiate your TA request through Armylgnited(Soldiers) or the Al Portal (Airman)

# **PERSONAL INFORMATION:**

YOUR NAME:	SUID:	SSN:	
LOCAL ADDRESS:			
SHIP EMAIL ADDRESS:	CELL PHONE:	ALT EMAIL ADDRESS:	
IAJOR: ARE YOU A CONTINUING, TRANSFER, FIRST-TIME STUDENT:			
GRADE LEVEL (Undergrad, Grad, N	Non-Degree (2 semesters only) or Ce	tification):	
	TA BENEFITS AND ENROLLME	NT (CHECK ONE):	
Active Duty Army			
Active Guard/Reserve (AGR)			
Army Guard or Reserves on De	ployment		
Army / Air National Guard			
Army Reserve			
Active Duty Airforce			
Please attach a copy of your of	class schedule when submitting this	form and list out your class titles and subjects below.	
Number of credits for SUMMER	<u>B 2024</u>		
Will you be using other military benefi	ts YES NO		
If yes, what type of benefits and includ	de them here:		

(Student's Signature)

(Date)

FOR DEPARTMENT USE ONLY		
Certificate of Eligibility on File		
Veterans Instate Tuition Review		
Confirmed credit count with schedule		
Folder		
Documents Printed		
Student Initiated TA Request In Portal		
Certified correct number of credits		