

**UNIVERSITY OF ILLINOIS AT CHICAGO – Office of the Dean of Students**

1200 W. Harrison Street, M/C 318 -- Chicago, Illinois 60607 -- Phone: (312) 996-1408 Fax: (312) 996-6088

**VA Education Benefits Form  
Academic Year 20\_\_\_\_ - 20\_\_\_\_**

**This form must be filled out once per academic year in order to receive benefits for Fall, Spring, and Summer semesters.**

**What you should do:**

1. You must answer all the questions and this form must be SIGNED.
2. Please submit all documents at the same time to the address above.
3. Notify Student Veterans Affairs if your enrollment changes due to add/drop or withdraw from courses.

**Section A – Student Information (Please print clearly)**

Salutation	First Name	M.I.	Last Name	Suffix
Street Address		City	State	Zip Code
Phone Number		UIC email address		

SSN	*VA File Number	**Payee Number
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*\* With few exceptions, such as those eligible for Chapter 35 dependants, a student's social security number assigned is the VA file number.*

*\*\*Payee Numbers (letter may be at end of the file number).*

*Chapter 30: Montgomery GI Bill Active Duty (VA File=SSN, Payee=00)*

*Chapter 31: Vocational Rehabilitation (VA File=SSN, Payee=00)*

*Chapter 32: Veterans Educational Assistance Program*

*Chapter 33: Post 9/11 GI Bill (VA File=SSN, Payee=00)*

*Chapter 35: Survivors and Dependents Educational Assistance (VA File=9 numbers, no letters, Payee=2 numbers, 1 letter) i.e. 41A 45E 49I, etc.*

*Chapter 1606: Montgomery GI Bill Selected Reserve (VA File=SSN, Payee=00)*

*Chapter 1607: Reserve Educational Assistance Program (VA File=SSN, Payee=00)*

**Section B – Student Status (only for students who**

Are you currently a guest student? Yes\_\_\_\_ No\_\_\_\_

Primary School: \_\_\_\_\_ State:\_\_\_\_\_

ENTER YOUR 9-DIGIT UIN

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