University of Utah Veteran Services Office

REQUEST FOR BENEFITS

200 South Central Campus Drive Union Bldg RM 418 Salt Lake City UT 84112-9052 http://www.registrar.utah.edu/veteran/

Phone (801) 581-6945 Fax (801) 585-0356 e-mail: <u>vetservices@utah.edu</u>

| Name: | UNID: |
|---|--|
| My Benefit Chapter is (check one): Ch. 30 (Montgomery/Active)* Ch. 31 (Vocational Rehabilitation) Ch. 33 (Post 9/11)* Ch. 35 (DEA)* Ch. 1606 (Montgomery/Reserve) | *Ch. 30/33 ONLY: Are you currently on Active Duty? Yes No *Ch. 33 ONLY: Were these benefits transferred to you by a spouse, parent or guardian? Yes No |
| What degree are you currently pursuing | |
| □BA - Bachelor of Arts | Graduate ☐ |
| ☐BS - Bachelor of Science | ☐Other: |
| What is your major? | |
| Be sure to specify emphasis, program, or trac Interpersonal, etc.), Art Studio (Ceramics, Illustrat | ck. For example: Communications (Organizational, tion, etc.). |
| Are you currently pursuing a minor/com **Minors must be required by your major, and ma **If you are doing Military Science, Naval Science | ay not qualify for benefits. e, etc. list them here. or?: |
| Fall 20; Credit Hours _ | |
| Spring 20; Credit Hours _ | |
| Summer 20; Credit Hours _ | |
| Sign here if you want Advanced Pay: (Only applies to CH 30, 35, 1606) You will only receive advanced pay if you did r a signed request at least thirty-five days prior | not receive benefits the previous semester, and if you submit |
| authorize us to talk to you or some one else by filling o | record to you or anyone else via phone or email. You can |
| Student's Signature | |