OMB Approved No. 2900-0098 Respondent Burden: 45 minutes Expiration Date: 10/31/2021

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VA DATE STAMP

(For VA Use Only)

DEPENDENTS' APPLICATION FOR VA EDUCATION BENEFITS

(Under Provisions of chapters 33 and 35, of title 38, U.S.C.)

INTERNET VERSION AVAILABLE - You may complete and submit your application online at: www.benefits.va.gov/gibill.										
	F	PART I - APPLICAN	TINFO	ORMATION						
1. SOCIAL SECURITY NUMBER	2.	SEX OF APPLICANT				3. DATE OF	BIRTH			
		MALE FEMALE	Ē							
4. NAME (First name, middle initial, last name)										
5. CURRENT MAILING ADDRESS (Number and street	et or rura	al route, city or P.O., State	e and Zi	P Code)						
	6. 7	TELEPHONE NUMBER(S)	(Includ	ling Area Code)						
HOME		CELL								
7 F MAIL ADDDESS (If world salts)										
7. E-MAIL ADDRESS (If applicable)										
8. DIRECT DEPOSIT (Attach a voided personal check or deposit slip to match the information entered below. See Instructions for additional information.)										
ROUTING OR TRANSIT NUMBER		ACCOUNT	TYPE			ACCOUNT NUMBER				
		CHECKING		SAVINGS						
9. PLEASE PROVIDE THE NAME, ADDRESS, A			SOME	ONE WHO WILL						
A. NAME	B. ADD	DRESS			C.	TELEPHO	NE NUMBER (Include Area Code)			
P	ART II	- QUALIFYING INDI	VIDU	AL INFORMA	TION					
10. NAME OF QUALIFYING INDIVIDUAL (PARENT C	OR SPOL	JSE) ON WHOSE ACCOU	NT BEN	EFITS ARE BEIN	G CLAIME	ED (First na	me, middle initial, last name)			
11. SOCIAL SECURITY NUMBER OR VA FILE NUMBER	BER -	12. BRANCH OF SERVICE	<u> </u>				13. DATE OF BIRTH			
14A. DID PARENT OR SPOUSE DIE WHILE SERVIN				14B. DATE OF	DEATH	1	FE LISTED AS MISSING IN ACTION P.O.W.			
YES NO (If "Yes," is checked complete Item 14B)		," is checked then you do not e Fry Scholarship)	qualify							
15. IS QUALIFYING INDIVIDUAL (PARENT OR SPOU	USE) ON	ACTIVE DUTY?		L		l				
YES NO										
16. DO YOU (APPLICANT) OR THE QUALIFYING INI	DIVIDUA	AL (PARENT OR SPOUSE	HAVE.	AN OUTSTANDIN	IG FELON	IY AND/OR	WARRANT?			
YES NO										
PAR	RT III - F	RELATIONSHIP ANI	BEN	EFIT INFORM	MATION					
17. YOUR RELATIONSHIP TO QUALIFYING INDIVIDU	UAL (Che	eck only one)								
SPOUSE/SURVIVING SPOUSE	1.1	1. D (17)		CHILD/STEPCHII			2 1.1 1. D (17)			
(Please complete only Section I on page 2, and then proceed to Part V) SECTION I - SPOUSE/SURVIVING SPOUSE										
18. IS A DIVORCE OR ANNULMENT PENDING TO T		19. IF YOU ARE THE			HAVE YOU	J REMARRI	ED?			
QUALIFYING INDIVIDUAL? YES NO		YES	NO	(If "Yes," please p	rovide date	of remarriag	re)			
(A FORM OO F 100	SHP	ERSEDES VA FORM 22-5				- "0				

SECTION I - SPOUSE/SURVIVING SPOUSE (Continued)										
20. SPOUSE/SURVIVING SPOUSE SELECT THE BENEFIT THAT YOU ARE APPLYING FOR BELOW:										
PLEASE CAREFULLY READ THE INFORMATION AND INSTRUCTIONS ON PAGE 5, ITEM 20 BEFORE SELECTING BOX "A" OR "B" BELOW REGARDING THE BENEFIT YOU ARE APPLYING FOR. THE INFORMATION AND INSTRUCTIONS ON PAGE ALSO PROVIDE LINKS TO VA WEBSITES WHERE YOU WILL BE ABLE TO COMPARE "DEA" AND "FRY" BENEFITS. YOU WILL ALSO FIND OTHER ELIGIBILITY RELATED INFORMATION THERE.										
PERMANENT AND	SURVIVING SPOUSE BASED ON 100% TOTAL DISABILITY, SERVICE CONNECTED DEATH, I AM APPLYING FOR A BENEFITS.	B. AS A SURVIVING SPOUSE BASED ON LINE OF DUTY DEATH AFTER SEPTEMBER 10, 2001, I AM APPLYING FOR CHAPTER 33 - FRY SCHOLARSHIP BENEFITS.								
NOTE - BY CHECKING THIS BOX I ACKNOWLEDGE THAT I UNDERSTAND THIS ELECTION IS <i>IRREVOCABLE</i> AND MAY NOT BE CHANGED. NOTE - BY CHECKING THIS BOX I ACKNOWLEDGE THAT I UNDERSTAND THIS ELECTION IS <i>IRREVOCABLE</i> AND MAY NOT BE CHANGED.										
SECTION II - CHILD/STEPCHILD/ADOPTED CHILD										
21. Cl	HILD/STEPCHILD/ADOPTED CHILD SELECT THE BE	ENEFIT THAT YOU ARE APPLYING FOR BELOW:								
IMPORTANT ►	OR "B" BELOW REGARDING THE BENEFIT YOU	I AND INSTRUCTIONS ON PAGE 6, ITEM 21 BEFORE SELECTING BOX "A" J ARE APPLYING FOR. THE INFORMATION AND INSTRUCTIONS ON PAGE 5 RE YOU WILL BE ABLE TO COMPARE "DEA" AND "FRY" BENEFITS. YOU INFORMATION THERE.								
A. I AM APPLYING FOR	R CHAPTER 35 - DEA BENEFITS.	B. I AM APPLYING FOR CHAPTER 33 - FRY SCHOLARSHIP BENEFITS.								
NOTE - BY CHECKING THIS BOX I. THIS ELECTION IS IRREVOCABLE	ACKNOWLEDGE THAT I UNDERSTAND AND MAY NOT BE CHANGED.	NOTE - BY CHECKING THIS BOX I ACKNOWLEDGE THAT I UNDERSTAND THIS ELECTION IS <i>IRREVOCABLE</i> AND MAY NOT BE CHANGED.								
may apply for both DEA and Fry Sch If you are eligible for both Chapter 35	line of duty prior to August 1, 2011, you nolarship benefits. (DEA) and Chapter 33 (Fry Scholarship) benefits or 35 benefit first, check the box below.	Important - If your parent died in the line of duty prior to August 1, 2011, you may apply for both DEA and Fry Scholarship benefits. If you are eligible for both Chapter 35 (DEA) and Chapter 33 (Fry Scholarship) benefits and you would like to use the Chapter 33 benefit first, check the box below.								
CHAPTER 35 - DEA		CHAPTER 33 - FRY SCHOLARSHIP								
and Indemnity Compensation (DIC) birthday you will lose eligibility for CAREFULLY READ THE INFO	or Pension and you may no longer be claimed as a od DIC or Pension payments and you will no longer be	6, ITEM 22 BEFORE COMPLETING THE ELECTION BOX BELOW.								
	ID THE EFFECTS THAT THIS ELECTION TO RECEIVE BENEFITS (Please read Information and Instruction)	VE DEA OR FRY SCHOLARSHIP BENEFITS WILL HAVE ON MY ELIGIBILITY ins Page 6 for additional information)								
PART IV - BENEFIT AND TYPE OF EDUCATION OR TRAINING INFORMATION										
23A. DATE YOU WILL BEGIN SO	CHOOL OR TRAINING (MM/DD/YYYY)									
23B. TYPE OF EDUCATION OR	TRAINING (Check ONE box)									
COLLEGE OR OTHER SCHOOL	DL									
FARM COOPERATIVE										
LICENSING OR CERTIFICATION	ON TEST									
APPRENTICESHIP OR OTHER	R ON-THE-JOB TRAINING									
NATIONAL ADMISSION EXAM	S OR NATIONAL EXAMS FOR CREDIT									
CORRESPONDENCE COURS	E									
FLIGHT TRAINING (Fry Schola	rship only)									
WHICH YOU ARE SEEKING	E A MENTAL OR PHYSICAL DISABILITY FOR SPECIAL RESTORATIVE TRAINING? ns, Page 6, for details regarding restorative training	DISABILITY FOR WHICH YOU ARE SEEKING SPECIAL								
YES		YES								
□ NO] NO								

SOCIAL SECURITY NUMBER OF APPLICANT

24. NAME AND ADDRESS OF SCHOOL OR TRAINING FACILITY (Number and street or rural route, city or P.O., State and ZIP Code)													
25. SPECIFY Y	OUR EDUCATION OR CAP	REER OBJECTIVE, IF KI	NOWN (e.g., Bachele	or of Arts in Accounting, Weldin	ng Certificate, Polic	ce Officer)							
26. WOULD YO vocational and	26. WOULD YOU LIKE TO RECEIVE VOCATIONAL AND EDUCATIONAL COUNSELING? (See Information and Instructions, Item 26 for more information regarding vocational and educational counseling) YES NO												
		PA	RT V - APPLIC	CATION HISTORY									
27. PRIOR TO	THIS APPLICATION, HAVI	E YOU EVER APPLIED	FOR OR RECEIVE	D ANY OF THE FOLLOWING	G VA BENEFITS?	(Check o	all appropriate boxes)						
A. DISABILITY COMPENSATION OR PENSION													
B. DEF	PENDENTS' INDEMNITY C	OMPENSATION (DIC)											
C. VO	CATIONAL REHABILITATIO	ON AND EMPLOYMENT	BENEFITS (Chapt	er 31)									
	ERANS EDUCATION ASS												
	ERANS EDUCATION ASSI ECIFY BENEFIT(S) BY CHE			SERVICE COMPLETE ITEMS 28 AND 2	29								
	TRANSFERRED ENT												
	CHAPTER 35 - SURV	IVORS' AND DEPENDE	NTS' EDUCATION	AL ASSISTANCE PROGRAI	M (DEA)								
	CHAPTER 33 - POST	-9/11 GI BILL MARINE C	SUNNERY SERGE	ANT DAVID FRY SCHOLAR	SHIP								
F. NO	NE .												
G. OTH	IER (Specify benefit(s):												
	T: Complete Items 28 and												
28. NAME OF	INDIVIDUAL ON WHOSE A	CCOUNT YOU PREVIO	USLY CLAIMED B	ENEFITS (First, Middle, La.	st)								
29. SOCIAL SI	ECURITY NUMBER OF IND	DIVIDUAL ON WHOSE A	CCOUNT YOU PR	EVIOUSLY CLAIMED BENE	FITS								
PART VI - APPLICANT'S MILITARY SERVICE INFORMATION (NOTE: Chapter 35 benefits are not payable while an eligible person is on active duty)													
30. HAVE YOU	J EVER SERVED ON ACTI	•					•						
YES	NO												
	31. INFORMATION A		` '	DUTY (If you need addi		e Item 3	7, Remarks)						
A. DATE EN	TERED ACTIVE DUTY	B. DATE SEPARA FROM ACTIVE D		C. BRANCH OF SERVICE ESERVE OR GUARD COMP		D. CHA	RACTER OF DISCHARGE						
					0.12.11								
		DART VII. ED	UCATION TO	AINING AND EMPLO	VMENT								
		PART VII - ED	OCATION, TR	AINING AND EMPLO	TIVICINI								
20. OUEOK TI	IE ADDDODDIATE DOV AN	D ENTED THE DATE IN		DUCATION & TRAINING		ı							
	IE APPROPRIATE BOX AN			NEVE	ER ATTENDED	33. DA	TE						
	JATED FROM HIGH SCHO T TO GRADUATE FROM F		DISCONTINUED F AWARDED GED	HIGH	H SCHOOL								
	34B. NAME AND LOCAT		OF TRAINING	34D. NUMBER OF	34E. DEGREE, D	I OMA							
34A. TYPE OF SCHOOL	OF SCHOOL	FROM	то	SEMESTER, QUARTER, OR CLOCK HOURS COMPLETED	OR CERTIFIC	CATE	34F. MAJOR FIELD OR COURSE OF STUDY						
	(City and State)	FROW	10	CLOCK HOURS COMPLETED	RECEIVE	:D							
HIGH SCHOOL													
COLLEGE													
VOCATIONAL													
OR TRADE													
OTHER													
(Specify)													
	İ	1	1	İ.	I	l							

PA	RT VII - EDUCATION, TRAINING	AND EMPLOYMENT (Contin	nued)						
	SECTION II - EI	MPLOYMENT							
	35. CURRENT AND PA	AST EMPLOYMENT							
A. EMPLOYER	B. JOB TITLE	C. NUMBER OF MONTHS EMPLOYED	D. LICENSE OR RATING						
NOTE: Complete Items 36A and 36B <i>only</i> is									
36A. DO YOU EXPECT TO RECEIVE FUND DEPARTMENT FOR THE SAME COUF RECEIVE VA EDUCATIONAL ASSISTATION OF THE PROPERTY OF THE PROP	RSES FOR WHICH YOU EXPECT TO	36B. SOURCE OF EDUCATIONA EMPLOYMENT	L ASSISTANCE FROM GOVERNMENT						
PART VIII	- REMARKS, REMINDERS AND	VA EDUCATION BENEFITS	PAMPHLET						
	SECTION I - I	REMARKS							
37. REMARKS (If more space is needed, pla	zase attacn a separate sneet oj paper. ве si	ure to incluae name ana social securi	ty number on each sneet)						
	SECTION II - F	REMINDERS							
DID YOU REMEMBER TO:									
WRITE YOUR COMPLETE MA	RITY NUMBER ON EACH PAGE AILING AND EMAIL ADDRESS UMENTS (e.g., birth certificate, marriage	license, DD214, etc.)							
	SECTION III - VA EDUCATION	ON BENEFITS PAMPHLET							
38. THE MOST CURRENT INFORMATION VA EDUCATION BENEFITS PAMPHLE		BLE ONLINE AT www.benefits.va.gov/	gibill. IF YOU WOULD LIKE A COPY OF THE						
	PART IX - CERTIFICATION AND	SIGNATURE OF APPLICAN	т						
I CERTIFY THAT all statements in	my application are true and correct to	the best of my knowledge and be	lief.						
SIGN HERE ▶	39A. SIGNATURE OF APPLICANT (DO NOT PRINT) 39B. DATE SIGNED								
IN INK PENALTY: Willfully false statements as to benefits and in criminal penalties.	o a material fact in a claim for education be	enefits is a punishable offense and ma	y result in the forfeiture of these or other						
Р	ART X - SIGNATURE OF PAREN t be completed by the parent, gu								
40. NAME OF PARENT, GUARDIAN, OR CU			ipplicant is a millor)						
40. NAME OF FARENT, GOARDIAN, OR CO	JSTODIAN (First, Maate mutat, Last) (Type of	- print)							
41. MAILING ADDRESS OF PARENT, GUA	RDIAN, OR CUSTODIAN								
Number and Street									
		Apt./Unit Number							
City, State, ZIP Code									
42A. TELEPHONE NUMBER(S) OF PAREN HOME:	T, GUARDIAN, OR CUSTODIAN (Include Ar	rea Code)							
42B. E-MAIL ADDRESS OF PARENT, GUA	RDIAN, OR CUSTODIAN (If applicable)								
43A. SIGNATURE OF: (Check one)	SIGN HERE ▶		43B. DATE SIGNED						
IN INK									

PARENT GUARDIAN CUSTODIAN (DO NOT PRINT)

VA FORM 22-5490, AUG 2020

PAGE 4

(Please retain these Information and Instructions Pages for future reference)

INFORMATION AND INSTRUCTIONS FOR COMPLETING THE DEPENDENTS' APPLICATION FOR VA EDUCATION BENEFITS (VA FORM 22-5490)

Do *not* use this form to apply for Veterans' education assistance based on your own service (chapters 30, 32, 33, or 1606) or Vocational Rehabilitation and Employment benefits (chapter 31). To apply for veterans' education assistance based on your own service, use VA Form 22-1990. To apply for Vocational Rehabilitation and Employment benefits, use VA Form 28-1900. VA forms are available at www.va.gov/vaforms.

INTERNET VERSION AVAILABLE - You may complete and submit this application on-line at www.benefits.va.gov/gibill. Click on "GI Bill: Apply for Benefits."

NOTE: The numbers on these Information and Instructions pages match the item numbers on this application. Items not mentioned are self-explanatory.

ITEM 8. The Department of the Treasury requires all Federal benefit payments be made by electronic funds transfer (EFT), also called direct deposit. To enroll in direct deposit, please attach a voided personal check <u>or</u> deposit slip, <u>and</u> provide the information requested in Item 8. If you **do not** have a bank account, please visit https://www.benefits.va.gov/benefits/banking.asp. This website provides information about the Veterans Benefits Banking Program (VBBP), and a link to banks and credit unions that may fit your needs. You may also call 1-800-827-1000. If you elect not to enroll, you must contact representatives handling waiver requests for the Department of the Treasury at 1-888-224-2950. They will encourage your participation in EFT and address any questions or concerns you may have.

ITEM 16. You will not be eligible to receive benefits for any period for which you or the qualifying individual on whose account you are claiming benefits has an outstanding felony warrant. Any benefits paid to you for such period will result in an overpayment and be subject to collection.

ITEM 17. If you are certifying that you are married for the purpose of VA benefits, your marriage must be recognized by the place where you and/or your spouse resided at the time of marriage or where you and/or your spouse resided when you filed your claim (or a later date when you became eligible for benefits) (38 U.S.C.§ 103(3)). Additional guidance on when VA recognizes marriages is available at http://www.va.gov/opa/marriage/.

ITEM 20. IMPORTANT - PLEASE READ THE INFORMATION BELOW BEFORE MAKING YOUR SELECTION IN ITEM 20A OR 20B REGARDING THE BENEFIT YOU ARE APPLYING FOR.

- To qualify for the Post-9/11 GI Bill Marine Gunnery Sergeant John David Fry Scholarship, you must be the surviving spouse of an individual who died in the line of duty while serving on active duty as a member of the Armed Forces after September 10, 2001.
- To qualify for Survivor's and Dependents' Educational Assistance (DEA) you must be either:
 - (1) The spouse of a veteran who is permanently and totally disabled as a result of a service-connected disability, OR
 - (2) The spouse of an individual on active duty who has been listed as missing in action, captured in the line of duty by hostile force, forcibly detained or interned in the line of duty by a foreign government or power for more than 90 days, *OR*
 - (3) The surviving spouse **or** child of a veteran who died of a service-connected disability or who dies while a service-connected disability was rated permanent and total in nature, **OR**
 - (4) The surviving spouse of an individual on active duty for which the evidence shows that the individual is hospitalized for receiving outpatient medical care services or treatment; has a total disability permanent in nature incurred or aggravated in the line of duty in the active military, naval, or air service; and the service person is likely to be discharged or released from such service for such disability.

NOTE: If you are eligible for both Chapter 35 Survivors' and Dependents' Educational Assistance Program (DEA) and Chapter 33 Post-9/11 GI Bill Marine Gunnery Sergeant John David Fry Scholarship (Fry Scholarship) benefits, you must relinquish/give up entitlement to one or the other benefit for which you are eligible, **even if entitlement arises from separate events**. In other words, you must forfeit eligibility to the other benefit even if your eligibility is due to:

- · A separate Period of Service (POS) other than the one for which the death of the spouse is associated; OR
- A separate POS other than the one for which your spouse has a total disability permanent in nature resulting from a service-connected disability; OR
- A separate POS based on any other criteria as listed in 38 U.S.C. § 3501(a)(1); OR
- Death of any other individual identified in Item 10 of this application.

IMPORTANT: You cannot retain eligibility for both programs simultaneously. Therefore, by checking either box "A" or box "B" in Item 20, you agree and understand that you are making an *irrevocable* election to receive the selected benefit and your election may not be changed.

IMPORTANT: Eligibility for (DEA) will be terminated in the event that VA determines that the individual on whose account benefits are claimed is no longer totally disabled or VA is notified that the individual is no longer listed as captured, missing in action, or forcibly detained.

Note: Before making your election selection, you can compare the differences between (DEA) and (FRY), and the benefits each provide in order to help you make the best choice that suits your needs. This benefit comparison information can be found on the VA website at: https://www.benefits.va.gov/gibill/docs/factsheets/fry_scholarship.pdf. You can also find additional information about each program by visiting the GI Bill website at: https://benefits.va.gov/gibill/ and using the comparison tool.

INFORMATION AND INSTRUCTIONS (Continued)

ITEM 21. IMPORTANT - PLEASE READ THE INFORMATION BELOW BEFORE MAKING YOUR SELECTION IN ITEM 21A OR 21B REGARDING THE BENEFIT YOU ARE APPLYING FOR.

- To qualify for the Post-9/11 GI Bill Marine Gunnery Sergeant John David Fry Scholarship, you must be the dependent child of an individual who died in the line of duty while serving on active duty as a member of the Armed Forces after September 10, 2001.
- To qualify for Survivor's and Dependents' Educational Assistance (DEA) you must be either:
 - (1) The child of a veteran who is permanently and totally disabled as a result of a service-connected disability; OR
 - (2) The child of an individual on active duty who has been listed as missing in action, captured in the line of duty by hostile force, forcibly detained or interned in the line of duty by hostile force, or forcibly detained or interned in the line of duty by a foreign government or power for more than 90 days, *OR*
 - (3) The child of a veteran who died of a service-connected disability or who dies while a service-connected disability was rated permanent and total in nature, **OR**
 - (4) The child of an individual on active duty for which the evidence shows that the individual is hospitalized for receiving outpatient medical care services or treatment; has a total disability permanent in nature incurred or aggravated in the line of duty in the active military, naval, or air service; and the service person is likely to be discharged or released from such service for such disability.

PARENT'S DEATH PRIOR TO AUGUST 1, 2011 -

 The election you choose in Item 21 does not eliminate your eligibility for the alternate education benefit (either Survivor's and Dependents' Educational Assistance (DEA) and the Chapter 33 Post-9/11 GI Bill Marine Gunnery Sergeant John David Fry Scholarship (Fry Scholarship)) based on the same event (i.e., your parent's line of duty death that occurred prior to August 1, 2011).

PARENT'S DEATH ON OR AFTER AUGUST 1, 2011 -

• The election you choose in Item 21 *does* eliminate your eligibility for the alternate education benefit (either Survivors' and Dependents' Educational Assistance Program (DEA) and the Chapter 33 Post-9/11 GI Bill Marine Sergeant John David Fry Scholarship (Fry Scholarship)), based on the same event (i.e., your parent's line of duty death that occurred on or after August 1, 2011). Therefore, you must relinquish/give up eligibility entitlement to the benefit that you are *not* applying for **but only with regard to the entitlement arising from the same event** (i.e., your parent's line of duty death that occurred on or after August 1, 2011). By checking either box "A" or box "B" in Item 21, you agree and understand that you are making an *irrevocable* election to receive the selected benefit and your election may not be changed.

IMPORTANT: Unlike spouses, children may be able to retain eligibility for both programs simultaneously if they qualify under different events and individuals (i.e., a separate parent's line of duty death that occurred on or after August 1, 2011).

IMPORTANT: Eligibility for (DEA) will be terminated in the event that VA determines that the individual on whose account benefits are claimed is no longer totally disabled or VA is notified that the individual is no longer listed as captured, missing in action, or forcibly detained.

NOTE: Before making your election selection, you can compare the differences between (DEA) and (FRY), and the benefits each provide in order to help you make the best choice that suits your needs. This benefit comparison information can be found on the VA website at: https://www.benefits.va.gov/gibill/docs/factsheets/fry_scholarship.pdf. You can also find additional information about each program by visiting the GI Bill website at https://benefits.va.gov/gibill/, and using the comparison tool.

ITEM 22. Your election to receive Survivors' and Dependents' Education Assistance (DEA) or Chapter 33 Post-9/11 GI Bill Marine Gunnery Sergeant John David Fry Scholarship (Fry Scholarship) in lieu of payments of compensation, pension, and Dependents' Indemnity Compensation (DIC) is final and cannot be changed. This means that if you are 18 years old, payments of compensation, pension, and Dependents' Indemnity Compensation (DIC) will be terminated upon issuance of a DEA or Fry Scholarship benefit payment. If you are under the age of 18, these benefits will be terminated on your 18th birthday. If you are planning to pursue a program of education for more than 36 months, you should consider deferring receipt of DEA or Fry Scholarship benefits. We strongly recommend that you discuss your education or training plans with a VA counselor before making a decision.

ITEM 23B. Types of education or training programs are self-explanatory, except for the following:

"Licensing or Certification Test" - A "licensing test" is a test offered by a state, local, or federal agency that is required by law to practice an occupation. A "certification test" is a test designed to provide affirmation of an individual's qualifications in a specific occupation.

"National Admission Exams or National Exams for Credit" - You may be reimbursed for the cost of approved tests for admission to or credit at institutions of higher learning.

"Correspondence Course" - You may receive benefits for correspondence training. Payments for correspondence courses are made quarterly after VA receives a certification showing the number of lessons completed. For more information on correspondence courses, you can go to the VA website at: https://www.benefits.va.gov/gibill/correspondence_training.asp.

"Flight Training" - You must already have a private pilot's license. If you are taking an Airline Transport Pilot course, you must have a valid first-class medical certificate on the date that you enter training. For all other flight courses, you must have a valid second-class medical certificate on the date that you enter training.

ITEMS 23C AND 23D - Any individual eligible under the Survivors' and Dependents' Educational Assistance program may receive Special Restorative Training or Specialized Vocational Training if a VA counselor determines that a specialized program is needed to overcome the effects of a physical or mental handicap. To be eligible for receipt of specialized training, the disability must prevent you from pursuing an educational program. Examples of Special Restorative Training include speech and voice correction, language retraining, lip reading, and Braille reading and writing. Specialized Vocational Training consists of specialized courses leading to a suitable vocational objective.

ITEM 26 - VA VOCATIONAL AND EDUCATIONAL COUNSELING HELP AVAILABLE: VA offers a wide range of services to assist you in planning your educational and/or career goals. Services include educational and vocational guidance and testing to develop a greater understanding of your skills, talents and interests. For more information on VA counseling, call VA toll-free at 1-888-GIBILL-1 (1-888-442-4551) or if you use the Telecommunications Device for the Deaf (TDD), the Federal Relay number is 711.

HOW TO FILE YOUR CLAIM

You may complete and submit your application online at www.benefits.va.gov/gibill or be sure to do the following:

(A) If you have selected a school or training establishment:

- **Step 1:** Mail the completed application to the VA Regional Processing Office for the region of that school's physical address. See page 8 for addresses of the VA Regional Processing Offices.
- **Step 2:** Tell the veterans certifying official at your school or training establishment that you have applied for VA education benefits. Ask him or her to submit your enrollment information using VA Form 22-1999, Enrollment Certification, or its electronic version.
- Step 3: Wait for VA to process your application and notify you of its decision concerning your eligibility for education benefits.

(B) If you have not selected a school or training establishment:

- **Step 1:** Mail the completed application to the VA Regional Processing Office for the region of your home address. Check page 8 for addresses of the VA Regional Processing Offices.
- Step 2: Wait for VA to process your application and notify you of its decision concerning your eligibility for education benefits.

ADDITIONAL HELP COMPLETING APPLICATION

If you need additional help completing this application or you want information about the work-study program, call VA toll-free at 1-888-GIBILL-1 (1-888-442-4551). If you use the Telecommunications Device for the Deaf (TDD), the Federal Relay number is 711. You can also get more information about education assistance from our education Internet site at www.benefits.va.gov/gibill.

CONTACT VA FROM OVERSEAS

Students and School Certifying Officials calling from outside the United States can contact VA by phone at: 001-918-781-5678 during business hours, 7 a.m. - 6 p.m. CST, Monday - Friday. This is not a toll-free number but the caller will be routed to the next available customer service representative. Non-overseas customers should call the toll-free number shown in "Additional Help Completing Application".

Eastern Region: VA Regional Office P.O. Box 4616 Buffalo, NY 14240-4616											
SERVES THE FOLLOWING STATES											
со	CO CT DC DE IA IL IN KS KY MA										
MD ME MI MN MO MT NC ND NE NH									NH		
NJ	NJ NY OH PA RI SD TN VA VT WI										
WV WY APO / FPO AA FOREIGN SCHOOLS US VIRGIN ISLANDS								ANDS			

Western Region: VA Regional Office P.O. Box 8888 Muskogee, OK 74402-8888											
	SERVES THE FOLLOWING STATES										
AK	AK AL AR AZ CA FL GA HI ID LA										
MS	MS NM NV OK OR PR SC TX UT WA										
А	APO / FPO AP GUAM PHILIPPINES										

REQUEST TO OPT OUT OF INFORMATION SHARING WITH EDUCATIONAL INSTITUTIONS

The Harry W. Colmery Veterans Educational Assistance Act of 2017 (Public Law 115-48), also know as the "Forever GI Bill," requires the Department of Veterans Affairs (VA) to make available to educational institutions information about the amount of educational assistance to which a veteran or other eligible individual is entitled. If you are eligible for the Post-9/11 GI Bill (Chapter 33), Montgomery GI Bill-Active Duty (Chapter 30), Montgomery GI Bill - Selected Reserve (Chapter 1606), or the Survivors' and Dependents Educational Assistance Program (DEA) (Chapter 35), you may elect to "opt-out" of these disclosures and have VA withhold this information instead. To request an opt-out, or for information about how to opt-out, please refer to our website at va.gov/find-forms/ to complete the VA Form 22-0993, Request to Opt-Out of Information Sharing with Educational Institutions.

PRIVACY ACT INFORMATION: VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., awards of benefits) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is required to obtain education benefits. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by a Federal Statute of law in effect prior to January 1, 1975, and still in effect. The requested information is considered relevant and necessary to determine the maximum benefits allowable under the law. While you do not have to respond, VA cannot process your claim for benefits unless the information is furnished as required by existing law (38 U.S.C. 3513). The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.

RESPONDENT BURDEN: We need this information to determine your eligibility for education benefits (38 U.S.C. 3513). Title 38 U.S.C. allows us to ask for this information. We estimate that you will need an average of 45 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at http://www.reginfo.gov/public/do/PRAMain. If desired, you can call 1-888-GI-BILL-1 (1-888-442-4551) to get information on where to send comments or suggestions about this form.