

Phone: 215.895.1600 Fax: 215.895.2939 Email via ask.drexel.edu drexel.edu/drexelcentral

Veterans' Benefits Certification Form

is available on the official U.S. Government website at benefits.va.gov/gibill.

Personal Information					
Student's Name		University ID			
Drexel Email			SSN		
Street Address					
City		State	ZIP	Phone	
Academic Information					
Grade Level:	Undergraduate	Graduate			
Academic Year:	2025-2026	2026-2027			
College/Major					
Military Affiliation (Se	lect One)				
Active Duty	Veteran	Spouse of Active Duty Se	ervice Member	Spouse of Veteran	
Dependent of Ac	ctive Duty Member/Veterar	ı			
VA Chapter (Select Onc	e)				
Chapter 30 — A	active Duty (Chapter 1606 — Selected	Reserves	_ Chapter 31 — Vocational Rehabilitation Counselor*	
Chapter 33 — P	ost 9/11 GI Bill** 0	Chapter 35 — Survivors	& Dependents Assis	tance***	
Chapter 33 — Ye	ellow Ribbon (Must have 10	00 percent eligibility und	ler Post-9/11 GI Bill		
Please provide the add	litional information below				
*Chapter 31 — Please	provide counselor's email ac	ldress			
**Chapter 33 (Percent	age) — Please provide eligib	oility percentage			
***Chapter 35 — Pleas	se provide the Social Securit	y number and the first a	nd last name of the	veteran you are receiving benefits from	
Signature					
By signing below, you	are certifying that:				
	gister for count towards the		-		
	the Office of Admissions at at have been transferred to			ersity the possibility that you may have credits from a gree program requirements.	
You understand that	at upon exhaustion of your	VA Benefits, you are sole	ely responsible for pa	aying any balance due to Drexel.	
Signature	ignature Date				
GI Bill® is a registered	d trademark of the U.S. Der	partment of Veterans Af	fairs (VA). More inf	ormation about education benefits offered by the VA	