



Veteran Services
 One Angwin Avenue
 Angwin, CA 94508

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 puc.edu/veterans

VETERAN BENEFITS

PARENT SCHOOL LETTER REQUEST FORM

Student Information

Name (Last, First, Middle Initial):	Last four of SSN:	PUC ID #:
Phone #:	Email:	
Term to be certified: <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer Benefits: <input type="checkbox"/> Ch 30 <input type="checkbox"/> Ch 31 <input type="checkbox"/> Ch 33 Veteran <input type="checkbox"/> Ch 33 Dependent <input type="checkbox"/> Ch 35 <input type="checkbox"/> Ch 1606		

Guest School Information (Attach proof of registration and Guest School's course description.)

All information is required

Name of Guest School:	Student ID number for Guest School:
VA Certifying Official:	Email:
Contact #:	Fax #:
School Address:	

Course(s)

Courses Added (e.g., ENGL 101)	Units	Office Use Only

Student's Signature: _____ **Date:** _____

OFFICIAL USE ONLY: PLEASE DO NOT WRITE BELOW	
<input type="checkbox"/> The above course(s) have been reviewed and <u>approved</u> by the VA Coordinator.	
<input type="checkbox"/> The above course(s) have been reviewed and <u>denied</u> by the VA Coordinator.	
Signature: _____	Date: _____
<i>Peter DeWeber VA Coordinator</i>	