

LOCATION:

Wayne County Community College District VETERANS AFFAIRS OFFICE VETERAN RESPONSIBILITIES FOR CERTIFICATION

Downriver___ Downtown___ Eastern___ Northwest___ Western___ District Office___

ΡI	EASE PRINT
D	ar Veteran, Survivors, or Dependents Benefit Recipient:
	ted below is a summary of current Benefits Recipient responsibilities. Please read and sign at the bottom of s form.
1.	I understand that I will no longer be certified for Veterans Benefits if I do not maintain a cumulative grade point average of 2.0., in accordance with the current WCCCD Catalog guidelines.
2.	If I receive a GPA or less than 2.0, , I will report it in writing to the WCCCD VA Office. Then the college will report the last date of attendance in writing to the Department of Veterans Affairs once the grades become available to the District Records and have been posted.
3.	If I withdraw officially or unofficially during a semester from any class or classes, I must notify the WCCCD Veterans Affairs Office. Changes such as dropping and adding must be reported as soon as possible. In addition, you must notify the Veterans Affairs Office before taking any Continuing Education Classes since these classes are for personal self-improvement.
	Y SIGNATURE INDICATES THAT I UNDERSTAND THE CONTENT OF THIS STATEMENT FRESPONSIBILITIES.
La	st nameFirst name
Stı	dent A #
Się	nature of benefits recipient Date