

# Veterans GI Bill

## Student Information

Educational Benefits – 1(888) GI BILL 1

(1(888) 442-4551)

Email: [muskupo@vba.va.gov](mailto:muskupo@vba.va.gov)

Website: [www.gibill.va.gov](http://www.gibill.va.gov)

### PERSONAL INFORMATION

PLEASE PRINT

NAME (last) (first) (middle)

Present Address City State Zip

Phone ( ) Cell Phone ( ) E-mail SS# Year at RHEMA  
1 2  
Circle Year Attending

### VA INFORMATION

Have you ever received VA education benefits before?  Yes  No

If "Yes" what institution(s) did you attend while receiving benefits?

Name of Institution	City	State
Name of Institution	City	State
Name of Institution	City	State

**NOTE: It is the student's responsibility to ensure that RBTC receives all pertinent transcripts.**

If "No" have you completed an application for VA benefits (VA Form 22-1990 or 22-5495)?  Yes  No

Have you been discharged from active military service?  Yes  No  
(If yes, we need a copy of your DD-214)

Check here if you have sent form DD-214 in with your 1<sup>st</sup> year application.

Are you involved in Active Reserves or National Guard?  Yes  No

Are you a dependent of a member of the Armed Forces who died or were disabled due to a service-related reason?  No  Yes – What is your VA File # \_\_\_\_\_

What Chapter(s) do you belong to? \_\_\_\_\_

**FIRST YEAR STUDENTS:** What group do you plan on going into for second year?

Evangelists  Missions  Pastors  Supportive Ministry  Children  Youth

**SECOND YEAR STUDENTS:** Please check the group that you chose for your second year.

Evangelists  Missions  Pastors  Supportive Ministry  Children  Youth

Is this the group that you chose last year as a first year student?  Yes  No

If "No" then you will need to complete a 22-1995 form to change your program of study.