

Department of Veterans Affairs Benefits

How to Apply for GI Bill Benefits

Overview

- VA Web Page: www.gibill.va.gov
- Application Process
- Payments
- Recoupment
- Overpayment

GI Bill Web Page – Click “Apply For Benefits”

UNITED STATES
DEPARTMENT OF VETERANS AFFAIRS



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Search
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DID YOU KNOW?

You can use your **POST-9/11 GI Bill** for **on-the-job training, apprenticeships, and non-college degree programs.**

★ [Apply for benefits](#)



POST ★ 9/11
GI BILL
It's Your Future

[more info »](#)

[GI BILL HOME](#) [APPLY FOR BENEFITS](#) [POST 9/11 GI BILL & OTHER PROGRAMS](#) [RESOURCES](#) [SUPPORT](#) [COMMUNITY](#) [CONTACT](#)

Welcome To The GI Bill Web Site

The Home For All Educational Benefits Provided By The Department Of Veterans Affairs

[Choosing a School](#)



[Apply For Benefits](#)



[Verify Attendance](#)



[School Resources](#)



[FAQs](#)

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Launch VONAPP

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GI BILL HOME APPLY FOR BENEFITS POST 9/11 GI BILL & OTHER PROGRAMS RESOURCES SUPPORT COMMUNITY CONTACT

"Road Map for Success"

- Step 1: Determine your best Benefit
- Step 2: Collect Your Paperwork and Information
- Step 3: Find a School
- Step 4: Calculate Your Benefits
- Step 5: Compare the Programs
- Step 6: Apply

Apply Online (VONAPP)

Apply Online (VONAPP)

VETERANS ON LINE APPLICATION



[Launch VONAPP and Apply for Benefits](#)

Please make sure you have all information and necessary documents. The estimated time to complete will be approximately 30 minutes.

Downloadable PDF

[Apply for Benefits Using a Printable Form](#)

Find a School



Apply For Benefits



Road Map to Success



Benefits

VA – Apply For Benefits

VONAPP Home

What is VONAPP?

Who should use VONAPP?

What do I need to run VONAPP?

Frequently Asked Questions

VA Partners – Service Organizations

State & County Organizations and Other Help

Instructions for filling out Applications

Veterans On-Line Application (VONAPP)

Welcome to the new and improved Veterans On-Line Application (VONAPP) website. Please select one of the following choices to begin using VONAPP.

I Am a New VONAPP User

(Please select this option if this is your first time using the VONAPP website.)

OR

I Have Used VONAPP Before

(Please select this option to Resume or Print a previous application.)

NEWS FLASH MESSAGE:

Did you know if you already have a claim pending for compensation and/or pension with the VA and need to provide information or upload attachments, you can use VA Form 21-4138, Statement in Support of Claim, available in VONAPP. When uploading attachments, include a statement that you are attaching evidence to support your claim. After completing the form, you will have the opportunity to attach your documents.

You can attach up to 5 electronic files to any VONAPP application before you submit it using VONAPP. The total size of all attachments must be 1 megabyte or less and must be one of the following file types: .doc, .xls, .gif, .jpeg, .jpg, .bmp, .tif, .txt, .pdf.

VA Form 22-1990 (Continued)

PART II - EDUCATION BENEFIT BEING APPLIED FOR *See instructions for benefit eligibility criteria*

- 9A. Chapter 33 - Post-9/11 GI Bill (Complete 9F if you are eligible for chapter 30, chapter 1606, or chapter 1607)
- 9B. Chapter 30 - Montgomery GI Bill Educational Assistance Program (MGIB)
- 9C. Chapter 1606 - Montgomery GI Bill - Selected Reserve Educational Assistance Program (MGIB-SR)
- 9D. Chapter 1607 - Reserve Educational Assistance Program (REAP)
- 9E. Chapter 32 or Section 903 - Post-Vietnam Era Veterans' Educational Assistance Program (VEAP)
- 9F. Chapter 33 Election (Complete only if this is your first request for chapter 33 and you are eligible for one of the benefits listed below)

By electing Chapter 33, I acknowledge that I understand the following:

- I may not receive more than a total of 48 months of benefits under two or more programs.
- If electing chapter 33 in lieu of chapter 30, my months of entitlement under chapter 33 will be limited to the number of months of entitlement remaining under chapter 30 on the effective date of my election. However, if I completely exhaust my entitlement under chapter 30 before the effective date of my chapter 33 election, I may receive up to 12 additional months of benefits under chapter 33.
- My election is irrevocable and may not be changed.

I elect to receive chapter 33 education benefits in lieu of the education benefit checked below, effective _____ (date)
 I understand that my election is irrevocable and may not be changed. (Check only one)

- Chapter 30 - Montgomery GI Bill Educational Assistance Program (MGIB)
- Chapter 1606 - Montgomery GI Bill - Selected Reserve Educational Assistance Program (MGIB-SR)
- Chapter 1607 - Reserve Educational Assistance Program (REAP)

PART III - TYPE AND PROGRAM OF EDUCATION OR TRAINING

10A. TYPE OF EDUCATION OR TRAINING *(See instructions for additional information)*

- | | |
|---|---|
| <input type="checkbox"/> COLLEGE OR OTHER SCHOOL <i>(Including on-line courses)</i> | <input type="checkbox"/> APPRENTICESHIP OR ON-THE-JOB |
| <input type="checkbox"/> VOCATIONAL FLIGHT TRAINING | <input type="checkbox"/> CORRESPONDENCE |
| <input type="checkbox"/> NATIONAL TEST REIMBURSEMENT <i>(SAT, CLEP, ETC.)</i> | <input type="checkbox"/> TUITION ASSISTANCE TOP-UP
<i>(Chapter 30 & 33 only)</i> |
| <input type="checkbox"/> LICENSING OR CERTIFICATION TEST REIMBURSEMENT
<i>(MCSE, CCNA, EMT, NCLEX, ETC.)</i> | |

VA DATE STAMP
(Do Not Write In This Space)

VA Form 22-1990 (Continued)

SOCIAL SECURITY NUMBER OF APPLICANT

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10B. PROVIDE THE FULL NAME AND ADDRESS OF THE SCHOOL, IF KNOWN *(Skip this item if you are only applying for National Test Reimbursement, Licensing and Certification Test Reimbursement, or Tuition Assistance Top-Up)*

10C. PLEASE SPECIFY YOUR EDUCATIONAL OR CAREER OBJECTIVE, IF KNOWN *(e.g. Bachelor of Arts in Accounting, welding certificate, police officer, etc.)*

PART IV - SERVICE INFORMATION

NOTE: It will help VA process your claim if you send a copy of the following:

- DD Form 214 (Member 4) for all periods of active duty service (excluding active duty for training)
- DD Form 2384, Notice of Basic Eligibility (NOBE) if applying for Chapter 1606
- Copies of orders if activated from the guard/reserves

11. ARE YOU NOW ON ACTIVE DUTY? *(Do not check "Yes" if you are currently on drilling status in the the Selected Reserve, or if you are on active duty for training)*

YES NO

12. ARE YOU NOW ON TERMINAL LEAVE JUST BEFORE DISCHARGE?

YES NO *(Please provide a copy of your DD Form 214 (Member 4) when issued)*

13. PLEASE COMPLETE THE FOLLOWING FOR EACH PERIOD OF MILITARY SERVICE

A. DATE ENTERED	B. DATE SEPARATED	C. SERVICE COMPONENT <i>(USN, USAF, USAR, ARNG, ETC.)</i>	D. SERVICE STATUS <i>(Active duty, drilling reservist, IRR, etc.)</i>	E. WERE YOU INVOLUNTARILY CALLED TO ACTIVE DUTY FOR THIS PERIOD?
9/26/2000	9/24/2004	USMC (EXAMPLE)	ACTIVE DUTY	NO
1/18/2005	8/14/2007	USMCR	DRILLING	N/A

VA Form 22-1990 (Continued)

PART V - EDUCATION AND EMPLOYMENT INFORMATION

14A. DID YOU RECEIVE A HIGH SCHOOL DIPLOMA OR HIGH SCHOOL EQUIVALENCY CERTIFICATE? (If "Yes" provide date)

YES DATE: _____ NO

14B. DO YOU HOLD ANY FAA FLIGHT CERTIFICATES? (If "Yes," specify each certificate in Part IX, Remarks)

YES NO

14C. EDUCATION AFTER HIGH SCHOOL (Including apprenticeship, on-the-job training, and flight training)

NAME AND LOCATION OF COLLEGE OR OTHER TRAINING PROVIDER	DATES OF TRAINING		NUMBER AND TYPE OF HOURS (Semester, Quarter, or Clock)	DEGREE, DIPLOMA, OR CERTIFICATE RECEIVED	MAJOR FIELD OR COURSE OF STUDY
	FROM	TO			

VA Form 22-1990 (Continued)

SOCIAL SECURITY NUMBER OF APPLICANT

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14D. EMPLOYMENT *(Only complete if you held a license or journeyman rating to practice a profession)*

EMPLOYMENT	PRINCIPAL OCCUPATION	NUMBERS OF MONTHS WORKED	LICENSE OR RATING
BEFORE MILITARY SERVICE			
AFTER MILITARY SERVICE			

PART VI - ENTITLEMENT TO AND USAGE OF ADDITIONAL TYPES OF ASSISTANCE

<p>15. DID YOU MAKE ADDITIONAL CONTRIBUTIONS (UP TO \$600.00) TO INCREASE THE AMOUNT OF YOUR MONTHLY BENEFITS? IF "YES," IT WILL HELP VA PROCESS YOUR CLAIM IF YOU SUBMIT ANY EVIDENCE YOU HAVE TO SUPPORT YOUR CLAIM <i>(e.g., cash collection voucher, leave and earnings statement(s), receipt voucher, etc.)</i></p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>16. DO YOU QUALIFY FOR A KICKER (sometimes called a "College Fund") BASED ON YOUR MILITARY SERVICE? (Kickers are additional amounts contributed by DOD to an education fund). If you qualify for a kicker, it will help VA process your claim if you submit a copy of the kicker contract. Reserve kicker contracts must include the amount and effective date.</p>	<p>ACTIVE DUTY KICKER <input type="checkbox"/> YES <input type="checkbox"/> NO RESERVE KICKER <input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>17. IF YOU GRADUATED FROM A MILITARY SERVICE ACADEMY, SPECIFY THE YEAR YOU GRADUATED AND RECEIVED YOUR COMMISSION.</p>	<p>Graduation Year <input type="text"/></p>
<p>18. WERE YOU COMMISSIONED AS THE RESULT OF A SENIOR ROTC (Reserve Officers Training Corps) SCHOLARSHIP? If you received your commission through a non-scholarship program, check "No." If "Yes," provide the date of your commission and the amount of your scholarship for each school year you were in the Senior ROTC program. Don't report your monthly subsistence allowance (stipend).</p> <p>Scholarship Amounts:</p> <p>Year: <input type="text"/> Amount: <input type="text"/></p> <p>Year: <input type="text"/> Amount: <input type="text"/></p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Date of Commission <input type="text"/></p>

VA Form 22-1990 (Continued)

19. ARE YOU CURRENTLY PARTICIPATING IN A SENIOR ROTC SCHOLARSHIP PROGRAM THAT PAYS FOR YOUR TUITION, FEES, BOOKS AND SUPPLIES UNDER SECTION 2107 OF TITLE 10, U.S. CODE?	<input type="checkbox"/> YES <input type="checkbox"/> NO
20. IF YOU HAD A PERIOD OF ACTIVE DUTY THAT THE DEPARTMENT OF DEFENSE COUNTS FOR PURPOSES OF REPAYING AN EDUCATION LOAN, CHECK "YES". SHOW THE PERIOD OF ACTIVE DUTY THAT THE MILITARY CONSIDERS AS BEING USED FOR THE PURPOSES OF REPAYING THIS EDUCATION LOAN IN PART IX "REMARKS".	<input type="checkbox"/> YES <input type="checkbox"/> NO
21. FOR ACTIVE DUTY CLAIMANTS ONLY: ARE YOU RECEIVING, OR DO YOU ANTICIPATE RECEIVING, ANY MONEY (INCLUDING BUT NOT LIMITED TO FEDERAL TUITION ASSISTANCE) FROM THE ARMED FORCES OR PUBLIC HEALTH SERVICE FOR THE COURSE FOR WHICH YOU HAVE APPLIED TO THE VA FOR EDUCATION BENEFITS? IF YOU RECEIVE SUCH BENEFITS DURING ANY PART OF YOUR TRAINING, CHECK "YES." NOTE: IF YOU ARE ONLY APPLYING FOR TUITION ASSISTANCE TOP-UP, CHECK NO IN THIS ITEM.	<input type="checkbox"/> YES <input type="checkbox"/> NO
22. FOR CIVILIAN EMPLOYEES OF THE U.S. GOVERNMENT ONLY: ARE YOU RECEIVING, OR DO YOU ANTICIPATE RECEIVING, ANY MONEY (INCLUDING, BUT NOT LIMITED TO, THE GOVERNMENT EMPLOYEES TRAINING ACT) FROM YOUR AGENCY FOR THE SAME PERIOD FOR WHICH YOU HAVE APPLIED TO THE VA FOR EDUCATION BENEFITS? IF YOU WILL RECEIVE SUCH BENEFITS DURING ANY PART OF YOUR TRAINING, CHECK "YES."	<input type="checkbox"/> YES <input type="checkbox"/> NO

VA Form 22-1990 (Continued)

SOCIAL SECURITY NUMBER OF APPLICANT

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PART VII - INFORMATION ON VA EDUCATION BENEFITS

NOTE: The most current information on VA education benefits is available online at www.gibill.va.gov

If you would like to receive a printed pamphlet check here.

PART VIII - MARITAL AND DEPENDENCY STATUS

NOTE : Only complete this section if you have military service before January 1, 1977 (or delayed entry before January 2, 1978). See instructions.

22. ARE YOU MARRIED?

YES NO

23. DO YOU HAVE ANY CHILDREN WHO ARE UNDER AGE 18, OR OVER 18 BUT UNDER AGE 23, NOT MARRIED AND ATTENDING SCHOOL, OR OF ANY AGE PERMANENTLY HELPLESS FOR MENTAL OR PHYSICAL REASONS?

YES NO

24. DO YOU HAVE A PARENT WHO IS DEPENDENT UPON YOU FOR FINANCIAL SUPPORT?

YES NO

PART IX - REMARKS

(If more space is needed, please attach a separate sheet of paper. Be sure to include your name and social security number on each sheet)

VA Form 22-1990 (Continued)

APPLICATION SUBMISSION REMINDERS

Did you remember to

- Write your social security number on each page?
- Write your complete mailing address?
- Attach all supporting documents (*e.g. voided check, orders, DD214, kicker contract, NOBE, cash collection voucher, etc.*)?

IF SO, PLEASE SIGN AND DATE THE APPLICATION BELOW

PART X - CERTIFICATION AND SIGNATURE OF APPLICANT

I CERTIFY THAT all statements in my application are true and correct to the best of my knowledge and belief. If on active duty, I also certify that I have consulted with an Education Service Officer (ESO) regarding my education program.

PENALTY - Willful false statements as to a material fact in a claim for education benefits is a punishable offense and may result in the forfeiture of these or other benefits and in criminal penalties.

25A. SIGNATURE OF APPLICANT *(DO NOT PRINT)*

25B. DATE SIGNED



Instructions for Dependents

- Fill out the VA Form 22-1990e (Dependent Application) using the Veterans On-Line Application (VONAPP)
 - www.gibill.va.gov

VA Form 22-1990e

OMB Control No. 2900-0154
Respondent Burden: 15 minutes



Department of Veterans Affairs

APPLICATION FOR FAMILY MEMBER TO USE TRANSFERRED BENEFITS

INTERNET VERSION AVAILABLE - You may complete and send your application over the Internet at: www.gibill.va.gov

PART I - APPLICANT INFORMATION

1. SOCIAL SECURITY NUMBER OF APPLICANT

2. SEX OF APPLICANT

MALE

FEMALE

3. APPLICANT'S DATE OF BIRTH

Month

Day

Year

4. NAME (First, Middle Initial, Last)

5. APPLICANT'S ADDRESS

Number and Street

Apt./Unit Number

City, State, ZIP Code

6A. APPLICANT'S TELEPHONE NUMBERS (Include Area Code)

Primary:

Secondary:

6B. APPLICANT'S E-MAIL ADDRESS (If applicable)

7. DIRECT DEPOSIT (Attach a voided personal check or provide the following information)

Routing or Transit Number

Account Type

Checking

Savings

Account Number

8A. RELATIONSHIP TO SERVICE MEMBER

SPOUSE

CHILD

8B. DID YOU RECEIVE A HIGH SCHOOL DIPLOMA OR HIGH SCHOOL EQUIVALENCY CERTIFICATE?

(If "Yes," provide date)

YES DATE:

NO

VA Form 22-1990e (Continued)

PART II - BENEFIT TRANSFERRED AND TYPE AND PROGRAM OF EDUCATION OR TRAINING

9A. BENEFIT TRANSFERRED TO YOU *(Select one box)*

- CHAPTER 33 - POST-9/11 GI BILL
- CHAPTER 30 - MONTGOMERY GI BILL EDUCATIONAL ASSISTANCE PROGRAM (MGIB)
- CHAPTER 1606 - MONTGOMERY GI BILL-SELECTED RESERVE EDUCATIONAL ASSISTANCE PROGRAM (MGIB-SR)
- CHAPTER 1607 - RESERVE EDUCATIONAL ASSISTANCE PROGRAM (REAP)

9B. TYPE OF EDUCATION OR TRAINING *(See instructions for additional information)*

- COLLEGE OR OTHER SCHOOL *(Including on-line courses)*
- VOCATIONAL FLIGHT TRAINING
- NATIONAL TEST REIMBURSEMENT *(SAT, CLEP, ETC.)*
- LICENSING OR CERTIFICATION TEST REIMBURSEMENT *(MCSE, CCNA, EMT, NCLEX, ETC.)*
- APPRENTICESHIP OR ON-THE-JOB
- CORRESPONDENCE
- TUITION ASSISTANCE TOP-UP

9B. FULL NAME AND ADDRESS OF SCHOOL, IF KNOWN

[Empty space for school name and address]

VA DATE STAMP
(Do Not Write In This Space)

9C. PLEASE SPECIFY YOUR EDUCATIONAL OR CAREER OBJECTIVE, IF KNOWN *(e.g. Bachelor of Arts in Accounting, welding certificate, police officer, etc.)*

[Empty space for educational or career objective]

VA FORM
AUG 2009

22-1990E

SUPERSEDES VA FORM 22-1990E, DEC 2008,
WHICH WILL NOT BE USED

VA Form 22-1990e (Continued)

PART III - EDUCATION AND EMPLOYMENT INFORMATION

10A. DO YOU HOLD ANY FAA FLIGHT CERTIFICATES? (If "Yes," specify below)

YES NO

10B. EDUCATION AFTER HIGH SCHOOL (Including apprenticeship, on-the-job training, and flight training)

NAME AND LOCATION OF COLLEGE OR OTHER TRAINING PROVIDER	DATES OF TRAINING		NUMBER AND TYPE OF HOURS (Semester, Quarter or Clock)	DEGREE, DIPLOMA, OR CERTIFICATE RECEIVED	MAJOR FIELD OR COURSE OF STUDY
	FROM	TO			

10C. EMPLOYMENT (Only complete if you held a license or journeyman rating to practice a profession)

EMPLOYMENT	PRINCIPAL OCCUPATION	NUMBER OF MONTHS WORKED	LICENSE OR RATING
JOB 1 SINCE HIGH SCHOOL			
JOB 2 SINCE HIGH SCHOOL			

Lice

PART IV - ENTITLEMENT TO AND USAGE OF ADDITIONAL TYPES OF ASSISTANCE

11A. FOR APPLICANTS ON ACTIVE DUTY ONLY: Are you receiving or do you anticipate receiving any money (including but not limited to Federal Tuition Assistance) from the Armed Forces or Public Health Service for the course for which you have applied to the VA for education benefits?

YES NO

11B. FOR APPLICANTS WHO ARE CIVILIAN EMPLOYEES OF THE U.S. GOVERNMENT ONLY: Are you receiving or do you anticipate receiving any money (including but not limited to the Government Employees Training Act) from your Agency for the same period for which you have applied to the VA for education benefits? If you will receive such benefits during any part of your training, check "YES."

YES NO

VA Form 22-1990e (Continued)

PART V - SERVICE MEMBER INFORMATION

12. SERVICE MEMBER'S SOCIAL SECURITY NUMBER

13. SERVICE MEMBER'S BRANCH OF SERVICE

14. SERVICE MEMBER'S NAME (*First, Middle Initial, Last*)

15. SERVICE MEMBER'S ADDRESS

Number and Street

Apt./Unit Number

City, State, ZIP Code

PART VI - CERTIFICATION AND SIGNATURE OF APPLICANT

I CERTIFY THAT all statements in my application are true and correct to the best of my knowledge and belief. If on active duty, I also certify that I have consulted with an Education Service Officer (ESO) regarding my education program.

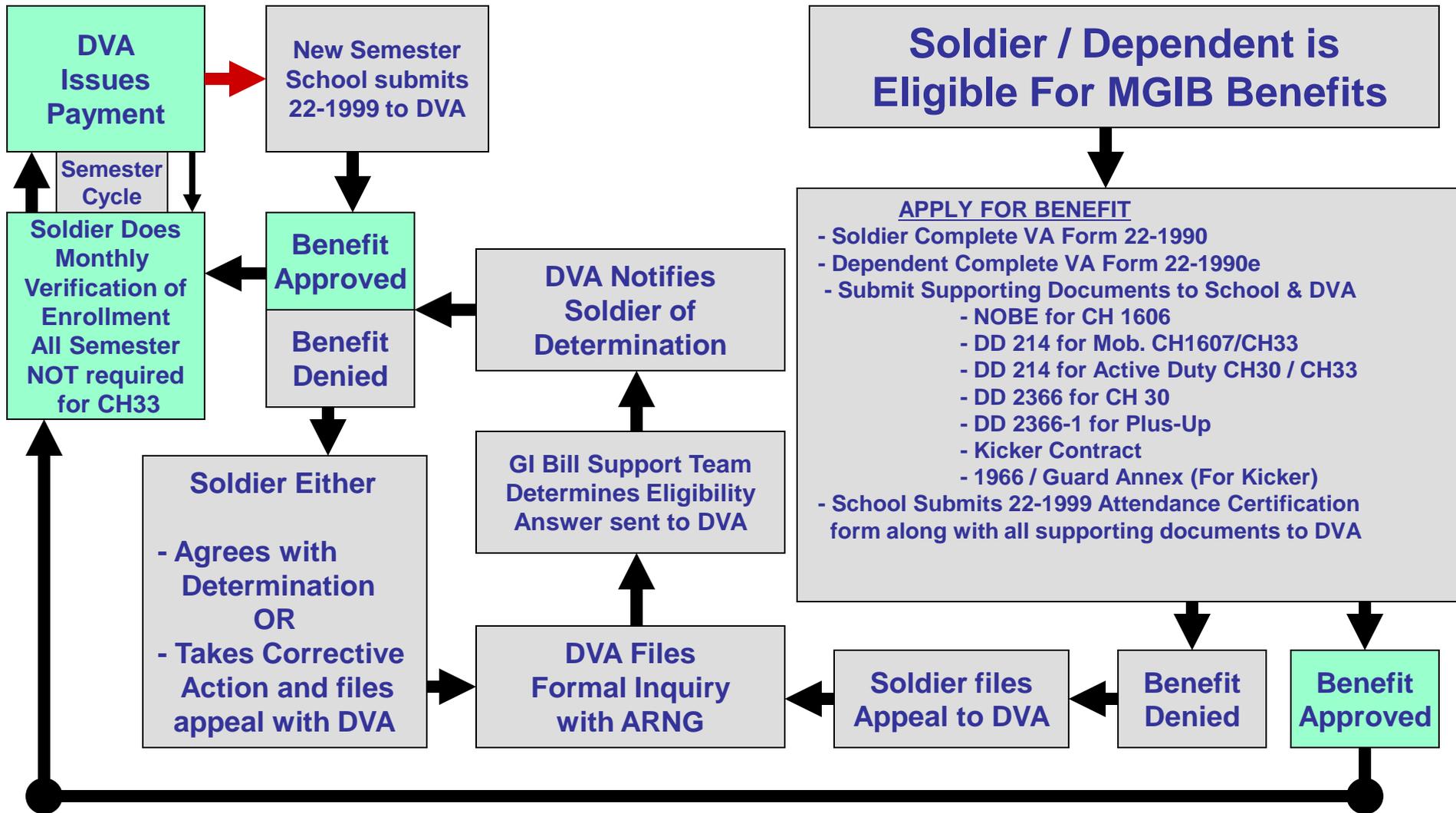
PENALTY - Willful false statements as to a material fact in a claim for education benefits is a punishable offense and may result in the forfeiture of these or other benefits and in criminal penalties.

16A. SIGNATURE OF APPLICANT (*DO NOT PRINT*)

16B. DATE SIGNED

VA FORM 22-1990E, AUG 2009

MGIB Processing Flow Chart



Application process for Post-9/11 Chapter 33 GI Bill is similar to other GI Bills

Payments – Determine Your Best Benefit (1 of 5)

- Benefit Payment is based on your situation
 - Current Category (Duty Status)
 - Payment Tier
 - Educational Goals
 - Transferability

- All GI Bill programs should be compared to determine which program is best for you
 - Counselors are available to assist you!

Payments – Determine Your Best Benefit (2 of 5)

FTA used by:	1606	1607	30	33	Kicker
M-DAY	YES	YES	YES	YES	YES
AGR	Suspended	CHOOSE 1 Only Up To The Cost of Course	YES / Top-Up Only Up To The Cost of Course	YES / Similar to Top-Up Only Up To The Cost of Course	Suspended
MIL-TECH	Yes	Yes	Yes	Yes	Suspended
Dedicated Guard Scholarship	Suspended	Suspended	/ Depends / Has Soldier received over 3400.00 every year?	YES	Suspended
GRFD Scholarship	Yes	Yes	/ Depends / “See Above”	YES	Yes

Payments – Determine Your Best Benefit (3 of 5)

**Assumption: AVG Army National Guard Soldier in WV has deployed 1 time for 12 – 15 months
 Soldier is taking 12 hrs / Full Time Status w/ 1 class minimum in a classroom per term**

**CH 1607 @ 60% Rate 820.80 per mo/ CH 33 @ 60% Rate for Tuition/ Fees, Books/Supplies & Housing
 School charge 250.00 per credit hr/ Zip Code Morgantown WV @ \$1176/ AVG 4 months pmt per term**

	CH 1606	CH 1607	CH 30	CH 33
Federal TA	3,000.00	3,000.00	3,000.00	3,000.00
Tuition	0.00	0.00	0.00	0.00
Fees	0.00	0.00	0.00	Estimate @ 400.00 Payment 240.00
Books & Supplies	0.00	0.00	0.00	500.04 / 324.02
Housing	0.00	0.00	0.00	7056.00 / 4233.60
Semester Payments	1332.00	3,283.20	5,472.00	0.00
Total Benefit	4332.00	6,283.00	8,472.00	7,797.62

Payments – Determine Your Best Benefit (4 of 5)

**Assumption: AVG Army National Guard Soldier in WV has deployed 1 time for 12 – 15 months
 Soldier is taking 12 hrs / Full Time Status w/ 1 class minimum in a classroom per term**

**CH 1607 @ 60% Rate 820.80 per mo/ CH 33 @ 60% Rate for Tuition/ Fees, Books/Supplies & Housing
 School charge 250.00 per credit hr/ Zip Code Morgantown WV @ \$1764/ AVG 4 months pmt per term**

	CH 1606	CH 1607	CH 30	CH 33
Federal TA	1,500.00	1,500.00	1,500.00	1,500.00
Tuition	0.00	0.00	0.00	1500.00
Fees	0.00	0.00	0.00	Estimate @ 400.00 Payment 240.00
Books & Supplies	0.00	0.00	0.00	500.04 / 324.02
Housing	0.00	0.00	0.00	7056.00 / 4233.60
Semester Payments	1,332.00	3,283.20	5,472.00	0.00
Total Benefit	2,832.00	4,783.00	6,972.00	7,797.62

Payments – Determine Your Best Benefit (5 of 5)

Assumption:

AVG Army National Guard Soldier in WV has deployed 1 time for 12 – 15 months

Soldier is taking 12 hrs / Full Time Status w/ 1 class minimum in a classroom per term

School charge 250.00 per credit hr/ Zip Code Morgantown WV @ \$1176/ AVG 4 months pmt per term

	CH 1606	CH 1607 @60% 820.80	CH 30	CH 33 @ 60% T&F Books & Supplies/ Housing
Annual Federal TA	4,500.00	4,500.00	4,500.00	4,500.00
Annual Tuition	0.00	0.00	0.00	1500.00
Annual Fees	0.00	0.00	0.00	Estimate @ 800.00 Payment 480.00
Annual Books / Sup.	0.00	0.00	0.00	1000.08 / 648.04
Annual Housing	0.00	0.00	0.00	9,408.00 / 5,644.80
Annual Payments	2,664.00	6,566.00	10,944.00	0.00
Total Annual Benefit	7,164.00	11,066.00	15,444.00	15,595.24

Key Reasons for Denial of Benefits

- Documents not on File in IPERMS OMPF
- Databases not updated / Bad Data
 - Education not updated in SIDPERS
 - State has not updated IMARC
 - No IADT feed from ATTRS
- Soldier/Dependent applied for the WRONG benefit
- Soldier is simply not eligible

Key Reasons for Denial of Benefits

- Documents not on File in IPERMS OMPF
- Databases not updated / Bad Data
 - Education not updated in SIDPERS
 - State has not updated IMARC
 - No IADT feed from ATTRS
- Soldier is simply not eligible

Overpayment & Recoupment

- **Overpayment** – Soldier or Dependent has received education benefits he/she was NOT authorized. This is collected by DVA
- **Recoupment** – Soldier or Dependent receives money he/she is authorized but later the Soldier or Dependent breaks the terms of the contract. Money will be recouped using recoupment formula, this is collected by DFAS

Recoupment Determination

- Terminated
 - Determined Unsatisfactory Participants
 - 9 AWOLS
 - Failure to Participate Satisfactory
 - Did not complete 6 Yr Obligation in Drilling Status
 - Discharge due to Pregnancy
 - Pregnancy not a disqualifying factor for military service

Recoupment Procedures

- DMDC compiles a list of potential recoupment cases and forwards to Reserve Components for determination
- NGB marks Soldier “waive” or “recoup” and returns to DMDC
- DMDC sends recoup to DFAS for recoup action
- DFAS notifies Soldier of recoupment action by memo
- DFAS memo contains DFAS POC which will refer ARNG Soldiers to ARNG GI Bill Support Team

Recoupment Rules

- Recoupment, waived/not applicable if:
 - Soldier with a recoupment amount of less than \$250
 - Soldiers currently serving in SR status
 - Deceased Soldiers
 - Soldiers who completed 6 yr obligation
 - Soldiers separated for Medical – Not willful misconduct
 - Soldiers separated with Hardship discharge

Uses of the GI Bill

1. College
2. Trade School
3. Apprenticeship & OJT (earn wages and GI Bill)
4. Vocational/Technical Training
5. Academies (Police & Fire)
6. Cooperatives (combination of school & work)
7. Correspondence
8. Flight Training (private pilot's license required)
9. Licensing & Certification Tests
10. Entrepreneurship programs

VA Contact Information

General VA Information:

1-888-442-4551 (1-888-GIBILL-1)

VA Web Site WWW.GIBILL.VA.GOV

Contact Information

General VA Information:

1-888-442-4551 (1-888-GIBILL-1)

VA Web Site WWW.GIBILL.VA.GOV

GI BILL Support Team

1-866-628-5999

gibill@ng.army.mil

SUMMARY

- VA Web Page
- Application Process
- Payments
- Recoupment
- Overpayment