



Request for Participation in the Yellow Ribbon Program 2021 - 2022

Instructions

Please complete all sections of this form, sign it and submit it to the Office of Registration and Records by October 1, 2021. A Certificate of Eligibility (COE) is required to receive the Yellow Ribbon benefit. Please attach a copy of your COE to this form. Only completed forms will be processed. Forms missing the COE will not be processed.

Name _____

Email Address _____ Phone _____

Academic Program _____

Fall 2021	Spring 2022	Summer 2022
Number of Credits: _____	Estimated Number of Credits _____	Estimated of Credits _____

Statement of Understanding

I understand that the Department of Veterans Affairs formally establishes eligibility for the Post--9/11 GI Bill's Yellow Ribbon Program and that this request for participation is contingent upon the VA's approval for such benefits. I believe that I am eligible for the Yellow Ribbon benefit based on one of the following qualifications:

- I served an aggregate period of active duty after September 10, 2001 of at least 36 months;
- I was honorably discharged from active duty for a service-related disability and I served 30 continuous days after September 10, 2001; or
- I am a dependent eligible for the Transfer of Entitlement under the Post--9/11 GI Bill based on a veteran's service under the eligibility criteria listed above.

Statement of Affirmation (Please read and initial each box.)

- I affirm that I am enrolled in CDU, and I understand that I must apply to the VA for a Certificate of Eligibility to qualify for the Yellow Ribbon benefit. Failure to submit a timely request for a Certificate of Eligibility from the VA may result in ineligibility from the Yellow Ribbon program.
- I acknowledge that Yellow Ribbon program funds are distributed on a first-come, first served basis, measured from the date of this Request for Participation Form.
- I understand that submitting this form does not guarantee my admittance to the Yellow Ribbon program. I also understand that CDU is not required to make Yellow Ribbon program contributions if I am not in good academic standing.

The information I submit on this form is true and correct to the best of my knowledge.

Signature _____ Date _____

For Office Use Only

Program Start Date _____ Anticipated Graduation Date _____ Date Awarded _____