



SAN MATEO COUNTY
COMMUNITY COLLEGE DISTRICT

SMCCCD

VETERAN'S CERTIFICATION REQUEST

Check Appropriate College

Admissions
Cañada College
Bldg. 9, 1st Floor
4200 Farm Hill Boulevard
Redwood City, CA 94061
Phone: (650) 306-3226
Fax: (650) 306-3113

Admissions
College of San Mateo
Bldg. 10, 3rd Floor
1700 West Hillsdale Blvd.
San Mateo, CA 94402
Phone: (650) 574-6165
Fax: (650) 574-6506

Admissions
Skyline College
Bldg. 2, 2nd Floor
3300 College Drive
San Bruno, CA 94066
Phone: (650) 738-4251
Fax: (650) 738-4200

This form is to be completed every semester and turned into your Home School Certifying Official.

Student ID: **G** _____ Which GI Bill? _____

Last Name: _____ First Name: _____ Middle: _____

Address: _____ City: _____ State: _____ Zip: _____

1st Telephone: _____ 2nd Telephone: _____

Check box if the above address/information has changed, and be sure to update your address in WebSMART.

Check box if your major has changed since last semester (Major): _____

Check box if no previous college/university. Check if transcripts from other colleges are already on file.

NOTE: All prior transcripts must be received in Admissions & Records before a second semester certification. VA Department will review credit evaluations during compliance reviews and credit evaluation records must be kept and made available to VA upon request.

Semester: Summer Fall Spring 20_____

Only classes reflected on your Student Educational Plan (SEP) will be certified for benefits.

Course Name and Number	Units	College/University
Total Number of Units for Certification		

I certify that the statements on this application are true and complete to the best of my knowledge. I understand it is my responsibility to notify the Home School Certifying Official of any course load change immediately. I accept personal responsibility for any overpayments made and I agree to refund such overpayments promptly to the VA.

Signature of Student: _____ Date: _____