

Houston Christian University

Office of Veteran Services

7502 Fondren Road, Houston, TX 77074

Email: veteran@hc.edu Website: www.hc.edu/veterans

Veteran Full-Time Enrollment Certification Form

Purpose of Form:

This form is to be completed by any military-affiliated student requesting to be certified as enrolled full-time for VA benefits purposes while engaged in an academic internship, clinical experience, graduate thesis, dissertation, or other approved academic activities that may not meet traditional full-time enrollment by credit hour. This request is subject to review and approval.

Submit the completed form to the Office of Veteran Services at veteran@hc.edu. Students should consult the Financial Aid Office and the School Certifying Official before submitting this form to understand how this may impact their VA benefits.

STUDENT INFORMATION

Name: _____

HCU ID (H#): _____

Email: _____

Phone Number: _____

Degree Program: _____

VA Chapter Benefit (e.g., 33, 31, 35): _____

ACADEMIC INFORMATION

Semester: Fall / Spring / Summer (Circle one)

Year: _____

Type of Activity (check one):

☐ Internship ☐ Clinical ☐ Graduate Research ☐ Thesis/Dissertation ☐ Other: _____

Course Prefix and Number: _____

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Course Title: _____

Number of Credits: _____

Start Date: _____ End Date: _____

Student's Expected Graduation Date: Month _____ Year _____

ACTIVITY DETAILS

Host Organization (if applicable): _____

Student Role / Description of Activity:

Business/Clinical Site Location:

[TO BE COMPLETED BY THE ACADEMIC ADVISOR]

I certify that the above-named student will engage in a university-approved academic activity that is equivalent to full-time status for degree progress and academic engagement. I recommend that the student be recognized as full-time for the semester listed above.

Is the student in good academic standing? ☐ Yes ☐ No

Advisor Name (Print): _____

Signature: _____ Date: _____

Dean Name (Print): _____

Signature: _____ Date: _____

[TO BE COMPLETED BY THE OFFICE OF VETERAN SERVICES]

I certify that the student meets eligibility for full-time enrollment status based on academic documentation and is approved for submission to the VA for benefits certification.

Houston Christian University

Office of Veteran Services

School Certifying Official (Print): _____

Signature: _____ Date: _____