



2025-26 VA EDUCATION BENEFITS ACKNOWLEDGMENT FORM

STUDENT INFORMATION	
Last Name:	First Name:
Student ID #:	Email:
Program of Study:	Chapter:

Please certify that you have read and understand the following:

- I understand that any benefits I receive are determined by the VA, and I must be enrolled in an eligible program, leading to a degree or certificate at Lower Columbia College.
- I understand the classes taken each quarter must be required to complete my declared academic program to be eligible for VA Education Benefits.
- I understand I must submit **official** copies of **all** previous college transcripts (including my Joint Services Transcript if applicable) to the LCC Registration Office **before** I am eligible to be certified to receive VA Education Benefits. I also understand that failure to comply with this requirement will delay my certification until completed.
- If I am a Veteran, I understand that my **Basic Training** will transfer in toward any required PE - Physical Education course required as a general elective once my Joint Services Transcript is reviewed.
- I understand that Lower Columbia College (LCC) cannot certify **fully online remedial courses** per VA guidelines. This is generally any course numbered below 100 level. VA Education Benefit students **are eligible** for applicable **in-person remedial courses**.
- I understand that I must report to LCC's [School Certifying Official](#) if I withdraw from one or more classes, and I may be assessed an overpayment if my enrollment status changes.
- I agree to **immediately** report **any** changes to my name, address, or any other contact information to LCC's [School Certifying Official](#).
- During any quarter, if I cancel my enrollment after LCC has already processed my certification and the VA disbursed payment, I understand that I may be required to repay funds as determined by the VA.
- I understand that in order to have my enrollment certified to the VA each quarter, I must submit a **Quarterly Enrollment Certification Request**.

Attach Certificate of Eligibility 

Attach DD-214 (if applicable) 

I affirm that the information provided on this form and any other documents provided are true, complete, and correct to the best of my knowledge.

Student's Signature: _____ Date: _____

Lower Columbia College does not discriminate on the basis of sex and prohibits sex discrimination in any education program or activity that it operates, as required by Title IX, including in admission and employment. Lower Columbia College provides equal opportunity in education and employment and does not discriminate on the basis of race, color, national origin, citizenship or immigration status, age, perceived or actual physical or mental disability, pregnancy, genetic information, sex, sexual orientation, gender identity, marital status, creed, religion, veteran or military status, or use of a trained guide dog or service animal as required by Title VI of the Civil Rights Act of 1964, Title VII of the Civil Rights Act of 1964, Title IX of the Educational Amendments of 1972, Sections 504 and 508 of the Rehabilitation Act of 1973, the Americans with Disabilities Act and ADA Amendment Act, the Age Discrimination Act of 1975, the Violence Against Women Reauthorization Act and Washington State's Law Against Discrimination, Chapter 49.60 RCW and their implementing regulations. All inquiries regarding compliance with Title IX, access, equal opportunity and/or grievance procedures should be directed to Vice President of Foundation, HR & Legal Affairs, 1600 Maple Street, PO Box 3010, Longview, WA 98632, title9@lowercolumbia.edu, Phone number, (360) 442-2120, Phone number/TTY (800) 833-6388. The notice of nondiscrimination is located at lowercolumbia.edu/disclosure/non-discrimination.