

OFFICE OF VETERANS AFFAIRS

STUDENT CONTRACT



Student Name

Social Security Number

Mailing Address

Primary Phone

MTC Student ID

Primary Email Address

I CERTIFY THE FOLLOWING

- › I understand that in order to receive benefits for a specified term, I must notify MTC's VA Office that I have registered for classes each semester. _____ (Initial)
- › I am responsible for notifying the MTC VA Office of any changes in my enrollment status. _____ (Initial)
- › Courses not required for my program of study will not be approved for payment of VA benefits. _____ (Initial)
- › I may owe MTC or the VA money for course failures, withdrawals and no-shows. If you repeat a failed class and fail it a second time, the grade will be non-punitive. You will be required to repay the VA funds received for that course. _____ (Initial)
- › If you no-show a course (register, do not attend, do not officially withdraw), the VA will not pay for the course. You will be charged full tuition and fees for the no-showed course. _____ (Initial)
- › I am only able to receive VA benefits for ONE (1) semester if I am pending a transcript from another institution. _____ (Initial) (answer N/A if no prior college attendance)

I have read the conditions of the MTC VA Student Contract and agree to be held responsible as set forth above.

Student Signature

Date