						OMB Approved No. 2900-0098 Respondent Burden: 45 minutes Expiration Date: 10/31/2021
Department of Veterans Affai	Ϋ́S					VA DATE STAMP (For VA Use Only)
				EEITO		(
(Under Provisions of		_	-	-		
ч.	•			,	gov/gibill	
INTERNET VERSION AVAILABLE - You may Reques	t to Opt-Out of Informa					
By checking the box, I CERTIFY THAT THE education benefits with any educational insti "opting-out" may delay that process. See Info	ution. I understand that sha	aring my informa	ation with my scho			
	PART I - APP	LICANT INF	ORMATION			
1. SOCIAL SECURITY NUMBER	2. SEX OF APPLIC	ANT		3	3. DATE OF BI	RTH
	MALE	FEMALE				
4. NAME (First name, middle initial, last name)						
5. CURRENT MAILING ADDRESS (Number and st	reet or rural route, city or l	P.O., State and Z	ZIP Code)			
	6. TELEPHONE NU	IMPED(S) (Incl	udina (nag Cada)			
PRIMARY	6. TELEPHONE NO	SECONDAR	0 /			
7. E-MAIL ADDRESS						
8. DIRECT DEPOSIT (Attach a vo	ded personal check or prov	vide the followin	g information. Se	e instructio	ons for additio	nal information.)
ROUTING OR TRANSIT NUMBER	<i>I</i>	ACCOUNT TYPE			ACCO	DUNT NUMBER
			SAVINGS			
9. PLEASE PROVIDE THE NAME, ADDRESS A. NAME	B, AND TELEPHONE NUN	IBER OF SOM	EONE WHO WILI			RE YOU CAN BE REACHED NUMBER (Include Area Code)
	D. ADDICEOU					
	PART II - QUALIFYII		IAL INFORMA	TION		
10. NAME OF QUALIFYING INDIVIDUAL (PAREN	FOR SPOUSE) ON WHOSI	E ACCOUNT BE	NEFITS ARE BEIN	IG CLAIME	D <i>(First name</i>	r, middle initial, last name)
11. SOCIAL SECURITY NUMBER OR VA FILE NU	MBER 12. BRANCH OF	SERVICE			1	3. DATE OF BIRTH
			-1			
14A. DID PARENT OR SPOUSE DIE WHILE SERV			14B. DATE OF	DEATH	14C. DATE OR P.	LISTED AS MISSING IN ACTION D.W.
YES NO (17 "Yes," is checked comple	te (If "No," is checked then y for the Fry Scholarship)	vou do not qualify				
15. IS QUALIFYING INDIVIDUAL (PARENT OR SF	OUSE) ON ACTIVE DUTY?					
16. DO YOU (APPLICANT) OR THE QUALIFYING	INDIVIDUAL (PARENT OR	SPOUSE) HAVE	AN OUTSTANDI	NG FELON	Y AND/OR W/	ARRANT?
17. YOUR RELATIONSHIP TO QUALIFYING INDIV	ART III - RELATIONSI	HIP AND BE		WATION		
SPOUSE/SURVIVING SPOUSE (Please complete only Section I on page 2,	, , ,	,	CHILD/STEPCHI			2, and then proceed to Part V)
(SECTION I - SP	·	·	Siny Been	on page	-,
18. IS A DIVORCE OR ANNULMENT PENDING TO QUALIFYING INDIVIDUAL?	THE 19. IF YOU	ARE THE SUR	VIVING SPOUSE,	HAVE YOL	JREMARRIED)?
	YES	NO	(If "Yes," please p	orovide date	of remarriage)	
A FORM 22-5490	SUPERSEDES VA FO WHICH WILL NOT BI		UN 2017,			PAGE 1

SOCIAL SECURITY NUMBER OF APP	LICANT

SECTION I - SPOUSE/SURVIVING SPOUSE (Continued)						
20. SPOUSE/SURVIVING SPOUSE SELECT THE BENEFIT THAT YOU ARE APPLYING FOR BELOW:						
IMPORTANT IN PLEASE CAREFULLY READ THE INFORMATION AND INSTRUCTIONS ON PAGE 5, ITEM 20 BEFORE SELECTING BOX "A" OR "B" BELOW REGARDING THE BENEFIT YOU ARE APPLYING FOR. THE INFORMATION AND INSTRUCTIONS ON PAGE 5 ALSO PROVIDE LINKS TO VA WEBSITES WHERE YOU WILL BE ABLE TO COMPARE "DEA" AND "FRY" BENEFITS. YOU WILL ALSO FIND OTHER ELIGIBILITY RELATED INFORMATION THERE.						
A. PERMANENT AND	SURVIVING SPOUSE BASED ON 100% TOTAL DISABILITY, SERVICE CONNECTED DEATH, I AM APPLYING FOR A BENEFITS.	B. AS A SURVIVING SPOUSE BASED ON LINE OF DUTY DEATH AFTER SEPTEMBER 10, 2001, I AM APPLYING FOR CHAPTER 33 - FRY SCHOLARSHIP BENEFITS.				
NOTE - BY CHECKING THIS BOX THIS ELECTION IS IRREVOCABL	I ACKNOWLEDGE THAT I UNDERSTAND E AND MAY NOT BE CHANGED.	NOTE - BY CHECKING THIS BOX I ACKNOWLEDGE THAT I UNDERSTAND THIS ELECTION IS <i>IRREVOCABLE</i> AND MAY NOT BE CHANGED.				
	SECTION II - CHILD/STEPCH	HILD/ADOPTED CHILD				
21. C	HILD/STEPCHILD/ADOPTED CHILD SELECT THE B	ENEFIT THAT YOU ARE APPLYING FOR BELOW:				
IMPORTANT ►	OR "B" BELOW REGARDING THE BENEFIT YO	N AND INSTRUCTIONS ON PAGE 6, ITEM 21 BEFORE SELECTING BOX "A" U ARE APPLYING FOR. THE INFORMATION AND INSTRUCTIONS ON PAGE 5 RE YOU WILL BE ABLE TO COMPARE "DEA" AND "FRY" BENEFITS. YOU D INFORMATION THERE.				
A. I AM APPLYING FO	R CHAPTER 35 - DEA BENEFITS.	B. I AM APPLYING FOR CHAPTER 33 - FRY SCHOLARSHIP BENEFITS.				
NOTE - BY CHECKING THIS BOX I THIS ELECTION IS IRREVOCABLE	ACKNOWLEDGE THAT I UNDERSTAND AND MAY NOT BE CHANGED.	NOTE - BY CHECKING THIS BOX I ACKNOWLEDGE THAT I UNDERSTAND THIS ELECTION IS IRREVOCABLE AND MAY NOT BE CHANGED.				
may apply for both DEA and Fry Sc If you are eligible for both Chapter 3	e line of duty prior to August 1, 2011, you holarship benefits. 5 (DEA) and Chapter 33 (Fry Scholarship) benefits er 35 benefit first, check the box below.	Important - If your parent died in the line of duty prior to August 1, 2011, you may apply for <i>both</i> DEA and Fry Scholarship benefits. If you are eligible for both Chapter 35 (DEA) and Chapter 33 (Fry Scholarship) benefits and you would like to use the Chapter 33 benefit first, check the box below.				
CHAPTER 35 - DEA		CHAPTER 33 - FRY SCHOLARSHIP				
and Indemnity Compensation (DIC birthday you will lose eligibility for CAREFULLY READ THE INFO	IMPORTANT: If you are over the age of 18 once you receive either the DEA or FRY SCHOLARSHIP benefits, you will no longer receive payments of Dependency and Indemnity Compensation (DIC) or Pension and you may no longer be claimed as a dependent in a Compensation claim. If you are under the age of 18, on your 18th birthday you will lose eligibility for DIC or Pension payments and you will no longer be claimed as a dependent in a Compensation claim. CAREFULLY READ THE INFORMATION AND INSTRUCTIONS ON PAGE 6, ITEM 22 BEFORE COMPLETING THE ELECTION BOX BELOW. YOU ARE STRONGLY ENCOURAGED TO DISCUSS YOUR ELECTION WITH A VA COUNSELOR.					
	ND THE EFFECTS THAT THIS ELECTION TO RECEN BENEFITS (Please read Information and Instruction	VE DEA OR FRY SCHOLARSHIP BENEFITS WILL HAVE ON MY ELIGIBILITY ons Page 6 for additional information)				
P	ART IV - BENEFIT AND TYPE OF EDUCA	ATION OR TRAINING INFORMATION				
23A. DATE YOU WILL BEGIN S	CHOOL OR TRAINING (MM/DD/YYYY)					
23B. TYPE OF EDUCATION OR	TRAINING (Check ONE box)					
COLLEGE OR OTHER SCHOO	DL					
FARM COOPERATIVE						
LICENSING OR CERTIFICATI	LICENSING OR CERTIFICATION TEST					
APPRENTICESHIP OR OTHER ON-THE-JOB TRAINING						
NATIONAL ADMISSION EXAMS OR NATIONAL EXAMS FOR CREDIT						
CORRESPONDENCE COURSE						
FLIGHT TRAINING (Fry Scholarship only)						
WHICH YOU ARE SEEKING	E A MENTAL OR PHYSICAL DISABILITY FOF SPECIAL RESTORATIVE TRAINING? ons, Page 6, for details regarding restorative training	DISABILITY FOR WHICH YOU ARE SEEKING SPECIAL				
YES		YES				
□ NO		□ NO				

24. NAME AND ADDRESS OF SCHOOL OR TRAINING FACILITY (Number and street or rural route, city or P.O., State and ZIP Code)								
25. SPECIFY YOUR EDUCATION OR CAREER OBJECTIVE, IF KNOWN (e.g., Bachelor of Arts in Accounting, Welding Certificate, Police Officer)								
26. WOULD YC vocational and YES	DU LIKE TO RECEIVE VOCA educational counseling)	TIONAL AND EDUCA	FIONAL COUN	NSELI	NG? (See Information and	Instructions, Iter	n 26 for m	ore information regarding
		РА	RT V - AP	PLIC	ATION HISTORY			
27. PRIOR TO	THIS APPLICATION, HAVE	YOU EVER APPLIED	FOR OR REC	EIVE	D ANY OF THE FOLLOWIN	G VA BENEFITS	? (Check a	all appropriate boxes)
A. DIS	ABILITY COMPENSATION C	R PENSION						
	PENDENTS' INDEMNITY CO							
	CATIONAL REHABILITATION		31)					
	ERANS EDUCATION ASSIS	1	/	ERVIC	E (Specify benefit(s):			
E. VET	ERANS EDUCATION ASSIS	TANCE BASED ON SO	OMEONE ELS	SE'S S	SERVICE			
	CIFY BENEFIT(S) BY CHEC		OX BELOW A	ND C	OMPLETE ITEMS 28 AND 2	29		
				TION		(DE4)		
					AL ASSISTANCE PROGRAI ANT DAVID FRY SCHOLAR	()		
_			JUNNERT SE	RGE	ANT DAVID FRT SCHOLAR	SHIF		
	IE							
G. OTH	ER (Specify benefit(s):							
	Complete Items 28 and 2					.)		
28. NAME OF	NDIVIDUAL ON WHOSE AC	COUNT YOU PREVIO	USLY CLAIM	ED BF	ENEFIIS (First, Middle, La	st)		
29. SOCIAL SE	ECURITY NUMBER OF INDI	VIDUAL ON WHOSE A	CCOUNTYO	U PRI	EVIOUSLY CLAIMED BENE	FITS		
PART VI - APPLICANT'S MILITARY SERVICE INFORMATION (NOTE: Chapter 35 benefits are not payable while an eligible person is on active duty)								
30. HAVE YOU EVER SERVED ON ACTIVE DUTY IN THE ARMED FORCES? (If "No," skip to Part VII)								
YES	NO				• ,			
	31. INFORMATION A	BOUT YOUR PERIC	D(S) OF AC	TIVE	E DUTY (If you need addi	itional space us	se Item 3	7, Remarks)
A. DATE EN	FERED ACTIVE DUTY	B. DATE SEPARA			C. BRANCH OF SERVICE	• • •	D. CHA	RACTER OF DISCHARGE
		FROM ACTIVE D		RE	SERVE OR GUARD COMP			
		PART VII - ED	UCATION	, TR	AINING AND EMPLO	YMENT		
SECTION I - EDUCATION & TRAINING								
32. CHECK THE APPROPRIATE BOX AND ENTER THE DATE IN ITEM 33 33. DATE								
GRADUATED FROM HIGH SCHOOL DISCONTINUED HIGH SCHOOL								
EXPECT TO GRADUATE FROM HIGH SCHOOL AWARDED GED								
34A. TYPE	34B. NAME AND LOCATIO	ON 34C. DATES	OF TRAINING	3		34E. DEGREE,		34F. MAJOR FIELD OR
OF SCHOOL	OF SCHOOL (City and State)	FROM	то		SEMESTER, QUARTER, OR CLOCK HOURS COMPLETED	OR CERTIFI RECEIVE		COURSE OF STUDY
HIGH SCHOOL								
COLLEGE								
VOCATIONAL								
OR TRADE								
OTHER								
(Specify)								

PART VII - EDUCATION, TRAINING AND EMPLOYMENT (Continued)							
SECTION II - EMPLOYMENT							
35. CURRENT AND PAST EMPLOYMENT							
A. EMPLOYER	B. JOB TITLE	C. NUMBER OF MONTHS EMPLOYED	D. LICENSE OR RATING				
NOTE: Complete Items 36A and 36B only	if you are a civilian employee of the U.S. G	overnment.					
DEPARTMENT FOR THE SAME COUL	36A. DO YOU EXPECT TO RECEIVE FUNDS FROM YOUR AGENCY OR 36B. SOURCE OF EDUCATIONAL ASSISTANCE FROM GOVERNMENT DEPARTMENT FOR THE SAME COURSES FOR WHICH YOU EXPECT TO 36B. SOURCE OF EDUCATIONAL ASSISTANCE FROM GOVERNMENT EXECUTE VA EDUCATIONAL ASSISTANCE? (If "Yes," complete Item 36B) 36B. SOURCE OF EDUCATIONAL ASSISTANCE FROM GOVERNMENT						
	I - REMARKS, REMINDERS AND SECTION I - R						
37. REMARKS (If more space is needed pl	ease attach a separate sheet of paper. Be su		ty number on each sheet)				
	SECTION II - R	EMINDERS					
DID YOU REMEMBER TO:							
WRITE YOUR COMPLETE M	RITY NUMBER ON EACH PAGE AILING ADDRESS UMENTS (e.g., birth certificate, marriage	license, DD214, etc.)					
	SECTION III - VA EDUCATIO	N BENEFITS PAMPHLET					
38. THE MOST CURRENT INFORMATION VA EDUCATION BENEFITS PAMPHLE		BLE ONLINE AT <u>www.benefits.va.gov/</u>	gibill. IF YOU WOULD LIKE A COPY OF THE				
	PART IX - CERTIFICATION AND						
I CERTIFY THAT all statements in	my application are true and correct to t	he best of my knowledge and be	lief.				
39A. SIGNATURE OF APPLICANT (DO NO	DT PRINT)		39B. DATE SIGNED				
SIGN HERE ► IN INK							
PENALTY : Willfully false statements as to benefits and in criminal penalties.	o a material fact in a claim for education be	nefits is a punishable offense and ma	y result in the forfeiture of these or other				
	PART X - SIGNATURE OF PAREN at be completed by the parent, gu						
40. NAME OF PARENT, GUARDIAN, OR C	USTODIAN (First, Middle Initial, Last) (Type or	print)					
41. MAILING ADDRESS OF PARENT, GUA							
Number and Street							
		Apt./Unit Number					
City, State, ZIP Code							
Primary:	IT, GUARDIAN, OR CUSTODIAN (Include Are	pndary:					
42B. E-MAIL ADDRESS OF PARENT, GUA							
43A. SIGNATURE OF: (Check one)			43B. DATE SIGNED				
	SIGN HERE ► IN INK						
PARENT GUARDIAN C	USTODIAN (DO NOT PRINT)						

INFORMATION AND INSTRUCTIONS FOR COMPLETING THE DEPENDENTS' APPLICATION FOR VA EDUCATION BENEFITS (VA FORM 22-5490)

Do **not** use this form to apply for Veterans' education assistance based on your own service (chapters 30, 32, 33, 1606, or 1607) or vocational rehabilitation benefits (chapter 31). To apply for veterans' education assistance based on your own service, use VA Form 22-1990. To apply for vocational rehabilitation benefits, use VA Form 28-1900. VA forms are available at <u>www.va.gov/vaforms</u>.

INTERNET VERSION AVAILABLE - You may complete and submit this application on-line at <u>www.benefits.va.gov/gibill</u>. Click on "GI Bill: Apply for Benefits."

NOTE: The numbers on these Information and Instructions pages match the item numbers on this application. Items not mentioned are self-explanatory.

ITEM 8. The Department of Treasury requires all Federal benefit payments be made by electronic funds transfer (EFT), also called direct deposit. Please attach a voided personal check or deposit slip or provide the information requested below to enroll in direct deposit. If you do not have a bank account, you must receive your payment through Direct Express Debit MasterCard. To request a Direct Express Debit MasterCard, you must apply at <u>www.usdirectexpress.com</u> or by telephone at 1-800-333-1795. If you elect not to enroll, you must contact representatives handling waiver requests for the Department of Treasury at 1-888-224-2950. They will address any questions or concerns you may have and encourage your participation in EFT.

ITEM 16. You will not be eligible to receive benefits for any period for which you or the qualifying individual on whose account you are claiming benefits has an outstanding felony warrant. Any benefits paid to you for such period will result in an overpayment and be subject to collection.

ITEM 17. If you are certifying that you are married for the purpose of VA benefits, your marriage must be recognized by the place where you and/or your spouse resided at the time of marriage or where you and/or your spouse resided when you filed your claim (or a later date when you became eligible for benefits) (38 U.S.C.§ 103(3)). Additional guidance on when VA recognizes marriages is available at <u>http://www.va.gov/opa/marriage/</u>.

ITEM 20. IMPORTANT - PLEASE READ THE INFORMATION BELOW BEFORE MAKING YOUR SELECTION IN ITEM 20A OR 20B REGARDING THE BENEFIT YOU ARE APPLYING FOR.

- To qualify for the Post-9/11 GI Bill Marine Gunnery Sergeant John David Fry Scholarship, you must be the surviving spouse of an individual who died in the line of duty while serving on active duty as a member of the Armed Forces after September 10, 2001.
- To qualify for Survivor's and Dependents' Educational Assistance (DEA) you must be either:
 - (1) The spouse of a veteran who is permanently and totally disabled as a result of a service-connected disability, OR
 - (2) The spouse of an individual on active duty who has been listed as missing in action, captured in the line of duty by hostile force, forcibly detained or interned in the line of duty by hostile force, or forcibly detained or interned in the line of duty by a foreign government or power for more than 90 days, OR
 - (3) The surviving spouse **or** child of a veteran who died of a service-connected disability or who dies while a service-connected disability was rated permanent and total in nature, **OR**
 - (4) The surviving spouse of an individual on active duty for which the evidence shows that the individual is hospitalized for receiving outpatient medical care services or treatment; has a total disability permanent in nature incurred or aggravated in the line of duty in the active military, naval, or air service; and the service person is likely to be discharged or released from such service for such disability.

NOTE: If you are eligible for both Chapter 35 Survivors' and Dependents' Educational Assistance Program (DEA) and Chapter 33 Post-9/11 GI Bill Marine Gunnery Sergeant John David Fry Scholarship (Fry Scholarship) benefits, you must relinquish/give up entitlement to one or the other benefit for which you are eligible, even if entitlement arises from separate events. In other words, you must forfeit eligibility to the other benefit even if your eligibility is due to:

- A separate Period of Service (POS) other than the one for which the death of the spouse is associated; OR
- · A separate POS other than the one for which your spouse has a total disability permanent in nature resulting
- from a service-connected disability; OR
- A separate POS based on any other criteria as listed in 38 U.S.C. § 3501(a)(1); OR
- Death of any other individual identified in Item 10 of this application.

IMPORTANT: You cannot retain eligibility for both programs simultaneously. Therefore, by checking either box "A" or box "B" in Item 20, you agree and understand that you are making an *irrevocable* election to receive the selected benefit and your election may not be changed.

IMPORTANT: Eligibility for (DEA) will be terminated in the event that VA determines that the individual on whose account benefits are claimed is no longer totally disabled or VA is notified that the individual is no longer listed as captured, missing in action, or forcibly detained.

Note: Before making your election selection, you can compare the differences between (DEA) and (FRY), and the benefits each provide in order to help you make the best choice that suits your needs. This benefit comparison information can be found on the VA website at: https://www.benefits.va.gov/gibill/docs/factsheets/fry_scholarship.pdf. You can also find additional information about each program by visiting the GI Bill website at: https://benefits.va.gov/gibill/docs/factsheets/fry_scholarship.pdf. You can also find additional information about each program by visiting the GI Bill website at: https://benefits.va.gov/gibill/docs/factsheets/fry_scholarship.pdf. You can also find additional information about each program by visiting the

INFORMATION AND INSTRUCTIONS (Continued)

ITEM 21. IMPORTANT - PLEASE READ THE INFORMATION BELOW BEFORE MAKING YOUR SELECTION IN ITEM 21A OR 21B REGARDING THE BENEFIT YOU ARE APPLYING FOR.

- To qualify for the Post-9/11 GI Bill Marine Gunnery Sergeant John David Fry Scholarship, you must be the dependent child of an individual who died in the line of duty while serving on active duty as a member of the Armed Forces after September 10, 2001.
- To qualify for Survivor's and Dependents' Educational Assistance (DEA) you must be either:

(1) The child of a veteran who is permanently and totally disabled as a result of a service-connected disability; *OR* (2) The child of an individual on active duty who has been listed as missing in action, captured in the line of duty by hostile force, forcibly detained or interned in the line of duty by hostile force, or forcibly detained or interned in the line of duty by a foreign government or power for more than 90 days, *OR*

(3) The child of a veteran who died of a service-connected disability or who dies while a service-connected disability was rated permanent and total in nature, **OR**

(4) The child of an individual on active duty for which the evidence shows that the individual is hospitalized for receiving outpatient medical care services or treatment; has a total disability permanent in nature incurred or aggravated in the line of duty in the active military, naval, or air service; and the service person is likely to be discharged or released from such service for such disability.

PARENT'S DEATH PRIOR TO AUGUST 1, 2011 -

• The election you choose in Item 21 *does not* eliminate your eligibility for the alternate education benefit (either Survivor's and Dependents' Educational Assistance (DEA) and the Chapter 33 Post-9/11 GI Bill Marine Gunnery Sergeant John David Fry Scholarship (Fry Scholarship)) based on the same event (i.e., your parent's line of duty death that occurred prior to August 1, 2011).

PARENT'S DEATH ON OR AFTER AUGUST 1, 2011 -

The election you choose in Item 21 *does* eliminate your eligibility for the alternate education benefit (either Survivors' and Dependents' Educational Assistance Program (DEA) and the Chapter 33 Post-9/11 GI Bill Marine Sergeant John David Fry Scholarship (Fry Scholarship)), based on the same event (i.e., your parent's line of duty death that occurred on or after August 1, 2011). Therefore, you must relinquish/give up eligibility entitlement to the benefit that you are *not* applying for but only with regard to the entitlement arising from the same event (i.e., your parent's line of duty death that occurred on or after August 1, 2011). By checking either box "A" or box "B" in Item 21, you agree and understand that you are making an *irrevocable* election to receive the selected benefit and your election may not be changed.

IMPORTANT: Unlike spouses, children may be able to retain eligibility for both programs simultaneously if they qualify under different events and individuals (i.e., a separate parent's line of duty death that occurred on or after August 1, 2011). **IMPORTANT**: Eligibility for (DEA) will be terminated in the event that VA determines that the individual on whose account benefits are claimed is no longer totally disabled or VA is notified that the individual is no longer listed as captured, missing in action, or forcibly detained.

NOTE: Before making your election selection, you can compare the differences between (DEA) and (FRY), and the benefits each provide in order to help you make the best choice that suits your needs. This benefit comparison information can be found on the VA website at: https://www.benefits.va.gov/gibill/docs/factsheets/fry_scholarship.pdf. You can also find additional information about each program by visiting the GI Bill website at https://benefits.va.gov/gibill/.andusing the comparison tool.

ITEM 22. Your election to receive Survivors' and Dependents' Education Assistance (DEA) or Chapter 33 Post-9/11 GI Bill Marine Gunnery Sergeant John David Fry Scholarship (Fry Scholarship) in lieu of payments of compensation, pension, and Dependents' Indemnity Compensation (DIC) is final and cannot be changed. This means that if you are 18 years old, payments of compensation, pension, and Dependents' Indemnity Compensation (DIC) will be terminated upon issuance of a DEA or Fry Scholarship benefit payment. If you are under the age of 18, these benefits will be terminated on your 18th birthday. If you are planning to pursue a program of education for more than 36 months, you should consider deferring receipt of DEA or Fry Scholarship benefits. We strongly recommend that you discuss your education or training plans with a VA counselor before making a decision.

ITEM 23B. Types of education or training programs are self-explanatory, except for the following: "Licensing or Certification Test" - A "licensing test" is a test offered by a state, local, or federal agency that is required by law to practice an occupation. A "certification test" is a test designed to provide affirmation of an individual's qualifications in a specific occupation.

"National Admission Exams or National Exams for Credit" - You may be reimbursed for the cost of approved tests for admission to or credit at institutions of higher learning.

"Correspondence Course" - You may receive benefits for correspondence training. Payments for correspondence courses are made quarterly after VA receives a certification showing the number of lessons completed. For more information on correspondence courses, you can go to the VA website at: https://www.benefits.va.gov/gibill/correspondence_training.asp.

"Flight Training" - You must already have a private pilot's license. If you are taking an Airline Transport Pilot course, you must have a valid first-class medical certificate on the date that you enter training. For all other flight courses, you must have a valid second-class medical certificate on the date that you enter training.

ITEMS 23C AND 23D - Any individual eligible under the Survivors' and Dependents' Educational Assistance program may receive Special Restorative Training or Specialized Vocational Training if a VA counselor determines that a specialized program is needed to overcome the effects of a physical or mental handicap. To be eligible for receipt of specialized training, the disability must prevent you from pursuing an educational program. Examples of Special Restorative Training include speech and voice correction, language retraining, lip reading, and Braille reading and writing. Specialized Vocational Training consists of specialized courses leading to a suitable vocational objective.

ITEM 26 - VA VOCATIONAL AND EDUCATIONAL COUNSELING HELP AVAILABLE: VA offers a wide range of services to assist you in planning your educational and/or career goals. Services include educational and vocational guidance and testing to develop a greater understanding of your skills, talents and interests. For more information on VA counseling, call VA toll-free at 1-888-GIBILL-1 (1-888-442-4551) or if you use the Telecommunications Device for the Deaf (TDD), the Federal Relay number is 711.

HOW TO FILE YOUR CLAIM

You may complete and submit your application online at <u>www.benefits.va.gov/gibill</u> or be sure to do the following:

(A) If you have selected a school or training establishment:

Step 1: Mail the completed application to the VA Regional Processing Office for the region of that school's physical address. See page 8 for addresses of the VA Regional Processing Offices.

Step 2: Tell the veterans certifying official at your school or training establishment that you have applied for VA education benefits. Ask him or her to submit your enrollment information using VA Form 22-1999, Enrollment Certification, or its electronic version.

Step 3: Wait for VA to process your application and notify you of its decision concerning your eligibility for education benefits.

(B) If you have not selected a school or training establishment:

Step 1: Mail the completed application to the VA Regional Processing Office for the region of your home address. Check page 8 for addresses of the VA Regional Processing Offices.

Step 2: Wait for VA to process your application and notify you of its decision concerning your eligibility for education benefits.

REQUEST TO OPT-OUT OF INFORMATION SHARING WITH EDUCATIONAL INSTITUTIONS

The Harry W. Colmery Veterans Educational Assistance Act of 2017 (Public Law 115-48), also known as the "Forever GI Bill," requires the Department of Veterans Affairs (VA) to make available to educational institutions information about the amount of educational assistance to which a veteran or other individual is entitled. However, you may elect to "opt-out" of these disclosures and have VA withhold this information instead.

ADDITIONAL HELP COMPLETING APPLICATION

If you need additional help completing this application or you want information about the work-study program, call VA toll-free at 1-888-GIBILL-1 (1-888-442-4551). If you use the Telecommunications Device for the Deaf (TDD), the Federal Relay number is 711. You can also get more information about education assistance from our education Internet site at www.benefits.va.gov/gibill.

CONTACT VA FROM OVERSEAS

Students and School Certifying Officials calling from outside the United States can contact VA by phone at: 001-918-781-5678 during business hours, 7 a.m. - 6 p.m. CST, Monday - Friday. This is not a toll-free number but the caller will be routed to the next available customer service representative. Non-overseas customers should call the toll-free number shown in "Additional Help Completing Application".

Eastern Region: VA Regional Office P. O. Box 4616 Buffalo, NY 14240-4616					
SERVES THE FOLLOWING STATES					
СТ	DE DC MA				
MD	ME	NC	NH		
NJ	NY	PA	RI		
VA VT US Virgin Foreign Islands Schools					
APO/FPO AA					

Western Region: VA Regional Office P. O. Box 8888 Muskogee, OK 74402-8888 SERVES THE FOLLOWING STATES					
AK	AL	AR	AZ		
CA	FL	GA	HI		
ID	LA	MS	NM		
NV	ОК	OR	PR		
SC	ТХ	UT	WA		
Guam	Philippines	s APO/FPO AP			

Central Region: VA Regional Office P. O. Box 32432 St. Louis, MO 63132-0832 SERVES THE FOLLOWING STATES					
СО	IA IL IN				
KS	KY	MI	MN		
МО	MT	NE	ND		
ОН	SD	TN	WV		
WI	WY				

PRIVACY ACT INFORMATION: VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., awards of benefits) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is required to obtain education benefits. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by a Federal Statute of law in effect prior to January 1, 1975, and still in effect. The requested information is considered relevant and necessary to determine the maximum benefits allowable under the law. While you do not have to respond, VA cannot process your claim for benefits unless the information is furnished as required by existing law (38 U.S.C. 3513). The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.

RESPONDENT BURDEN: We need this information to determine your eligibility for education benefits (38 U.S.C. 3513). Title 38 U.S.C. allows us to ask for this information. We estimate that you will need an average of 45 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at http://www.reginfo.gov/public/do/PRAMain. If desired, you can call 1-888-GI-BILL-1 (1-888-442-4551) to get information on where to send comments or suggestions about this form.