

Yellow Ribbon Program Application

Name:

Student ID:_____

Primary Phone:_____

E-mail:

The Yellow Ribbon GI Education Enhancement Program is a provision of the Post-9/11 Veterans Education Assistance Act of 2008. The Post-9/11 GI Bill will pay your tuition based upon the highest in-state tuition charged by an education institution in Montana (\$205.40 per credit). Under the Yellow Ribbon agreement, Helena College will then contribute up to 50% of the remaining tuition expenses, and the Department of Veterans Affairs will match that amount.

Only individuals entitled to the maximum benefit rate-100% (based on service requirements) may receive Yellow Ribbon benefits. More detailed information about the Yellow Ribbon Program can be found at <u>http://www.gibill.va.gov/GI_Bill_Info/CH33/Yellow_Ribbon.htm</u>.

I qualify for this benefit under the following clause:

_____ I served an aggregate period of active duty after September 10, 2001, of at least 36 months and was honorably discharged.

_____ I was honorably discharged from active duty for a service connected disability and served 30 continuous days after September 10, 2001

_____ I am a dependent eligible for Transfer of Entitlement under the Post-9/11 GI Bill based on an individual's service under the eligibility criteria listed above.

Please read and initial the following statements:

_____ I understand that I must maintain a minimum GPA of 2.00 per semester. I also understand that I am to maintain satisfactory academic progress according to college standards in my given degree program. Failure to adhere to these standards will result in my removal from the program.

_____ I understand that I am to abide by attendance requirements for all scheduled classes. Any course failure due to nonattendance will result in my removal from the program.

_____ I understand that I will be held to the highest standards of conduct as outlined in the Student Code of Conduct found in the Helena College Student Handbook. Any finding of misconduct subject to disciplinary procedures outlined in the code of conduct will result in my removal from the program.

I hereby certify that to the best of my knowledge all information provided is true and accurate and that I understand all of the program requirements as detailed above.

Cignature	Deter
Signature:	Date: