|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name (Last, First M.I.) | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| Student ID Number | | | Social Security Number | | | | | Date of Birth | | | | | | |
|  | | |  | | | | |  | | | | | | |
| Street Address | | | | | | City | | | | State | | Zip Code | | |
|  | | | | | |  | | | |  | |  | | |
| Home Phone | | | Cell Phone | | | | Email Address | | | | | | | |
|  | | |  | | | |  | | | | | | | |
| Eagles Eye Email (will only send info from school to this address) | | | | |  | | | | | | | | | |
| Name of Major | | | | Type of Major (please check one) | | | | | | | | | | |
|  | | | |  | AA | | |  | AAS | | | |  | AS |
| Education Benefit Being Applied For (please check one) | | | | | | | | | | | | | | |
|  | Chapter 33 (Post-9/11 GI Bill) **VETERAN** | | | | | | | | | | | | | |
|  | Chapter 33 (Post-9/11 GI Bill) **TRANSFER OF ENTITLEMENT \*\*** | | | | | | | | | | | | | |
|  | Chapter 30 (Montgomery GI Bill) | | | | | | | | | | | | | |
|  | Chapter 35 (Dependent or Spouse from a deceased vet or 100% disabled vet), **\*\***  please provide the claim number or the vets social security number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | |
|  | Chapter 1606 (Active Reserve or National Guard) | | | | | | | | | | | | | |
|  | Chapter 1607 (REAP) | | | | | | | | | | | | | |
|  | Chapter 31 (VA Voc Rehab) | | | | | | | | | | | | | |
| Certification Status (please check one and complete any additional information, if needed) | | | | | | | | | | | | | | |
|  | First time – “I have never used my education benefits and would like to begin using them.” | | | | | | | | | | | | | |
|  | Continuing – “I have attended and used my benefits at LCCC but have changed my major.” | | | | | | | | | | | | | |
|  | Reinstating – “I have attended and used my benefits at LCCC but has been a year or longer.” | | | | | | | | | | | | | |
|  | | Transferring – “I have used my education benefits at a different school and want to transfer to LCCC.” |  | |  |  | | | |  |  | | | |
|  | Transferring- “I have used my benefits at a different school and want to transfer to LCCC” | | | | | | | | | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Are you using | Guard Tuition Assistance | Overseas Combat | MyCAA | DVR | Other “**Tuition** **Only**” Source ex scholarship |
| Branch of Service | Coast Guard | Air Force | Navy | Marines | Army |
|  | Active Duty | Reserve | Veteran | Spouse | Dependent |

\*\*For those using parent’s/spouse’s education benefits, please list entry date and, if applicable, exit date of service\*\*

|  |
| --- |
| **LARAMIE COUNTY COMMUNITY COLLEGE** |
|  |
|  |
|  |
|  |
|  |
|  |

 

1400 E College Dr. 1125 Boulder Dr.

Cheyenne, WY 82007 Laramie, WY 82070