

## UNT Veteran Certification Form for Location

To be submitted as part of certification to  
Student Accounting - Student Veterans Benefits Office.

Student Name: \_\_\_\_\_ UNT ID#: \_\_\_\_\_

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The Department of Veterans Affairs (VA) requires schools to report where students are attending the majority of the term they are certified. The student should bring this form to their Academic Advisor/Intern Coordinator for further processing. Academic Advisor/Intern Coordinator actions required:

- Complete each section below.
- Sign the document confirming information is correct.
- Return form to the Student Accounting Veterans Benefits Office:  
**SFS-VetBenefits@ad.unt.edu**  
**Fax: 940-565-3441**

This completed form must be submitted by the Academic Advisor/Intern Coordinator on behalf of the student as part of the certification process. The information provided on this form plays a vital role in determining the housing stipend rate from the VA. If you have any questions or need any additional information please feel free to contact the Student Accounting Veterans Benefits Office at 940-369-8021 or SFS-VetBenefits@ad.unt.edu.

### THE FOLLOWING IS TO BE COMPLETED BY AN ACADEMIC ADVISOR OR THE INTERN COORDINATOR.

Advisor/Coordinator Name: \_\_\_\_\_ Department/Campus Office: \_\_\_\_\_

Title \_\_\_\_\_ E-Mail: \_\_\_\_\_ Telephone: \_\_\_\_\_

Student's Major/Minors: \_\_\_\_\_

Course Name: \_\_\_\_\_ Semester: \_\_\_\_\_ Year: \_\_\_\_\_

This student will be completing:    Internship    Practicum    Student Teaching    Study Abroad

### List the location the student will be attending below:

Located in \_\_\_\_\_ (City, State) \_\_\_\_\_ (Zip Code)

Is this course mandatory?     Yes     No

This course is \_\_\_\_\_ credit hours.

This student will be working \_\_\_\_\_ hours per week toward course credit.

Advisor/Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_