Frederick Community College
Veteran Services
Guest Student Declaration of Intent

This form is used for students who are attending another institution as their primary degree seeking school and taking coursework at Frederick Community College (FCC) to transfer back to that institution for graduation requirement. <u>The student must also provide the FCC Veterans Affairs Certifying Official (VCO) with the following:</u>

1. **An official, signed and dated letter from the primary institution's VA Certifying Official stating that the courses listed below are approved and will transfer at full value back to the student's primary school. (See VA Certifying Official Handbook page 52).**
2. **A copy of the VA eligibility paperwork (Certificate of Eligibility or Letter of Eligibility).**

_____ _____ _____
Student Last Name First Name Middle Initial

_____ _____ _____
Home Street Address City and State Zip Code

(_____)_____ Is this? ☐ Home ☐ Cellular _____
Telephone Number Primary Institution

FOR WHICH SEMESTER?	
Course Number and Name at Frederick Community College	**Credit Hours**

Certification of Understanding (CAREFULLY READ AND INITIAL EACH ITEM)

_____ FCC will certify my class schedule to the Department of Veterans Affairs (VA), who will combine the enrollment with that at my primary institution. I am responsible for paying my FCC tuition and fee bill in full by the required due date or risk being dropped from my FCC course(s). Chapter 31 recipients may provide a copy of their VA FORM 28-1905 to the Cashier's Office in place of payment. Chapter 33 recipients see next statement.

_____ If I am a recipient of Chapter 33 (Post 9/11 GI Bill) benefits, I may be eligible to have my classes held. See the VCO for deadlines for submitting this form. Any balance not covered by the VA will be my responsibility in full immediately upon notice.

_____ I am responsible for immediately notifying the FCC Office of Veterans Affairs if I add, drop, or withdraw from any course. My failure in notification may result in me owing the VA for an overpayment, including any that may have been made to FCC on my behalf.

_____ _____ _____
Student Signature FCC ID Number Date

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(301) 624-2836
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