

## VETERANS' STATISTICAL DATA SHEET

1. STUDENT'S NAME 2. PEOPLE SOFT NUMBER 3. GI BILL CHAPTER First MI Last 4. STUDENT'S ADDRESS  Address 1 Address 2 City State ZIP Code 5. STUDENT'S TELEPHONE NUMBER 6. STUDENT'S E-MAIL ADDRESS  FART 2 - ENROLLMENT INFORMATION 7. GRADUATE UNDERGRADUATE GRADUATE SEMESTER CALENDAR YEAR CREDITS 9. DEGREE SEMESTER CALENDAR YEAR SPRING 10. PROGRAM SUMMER (12 WEEKS) SUMMER (16 WEEKS) SUMMER (16 WEEKS) SUMMER (16 WEEKS) SUMMER (16 WEEKS) 11. I understand that it is my responsibility to certify for each semester for which i plan to receive benefits, in person, at the Veterans' Initial 12. I understand that it is my responsibility to report any status changes (including add/drop, G. I, or W grades, address change, change of major or school, or any other changes that may affect my entitlement to G. II. Bill benefits.  Signature  Date	PART 1 – STUDENT INFORMATION					
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Signature						
Oignature Date						

## **INSTRUCTIONS FOR STUDENT**

- 1. Read and initial each statement.
- 2. Sign and date where designated.3. Fax or scan and e-mail completed document to:
  - 412-624-7646
  - veterans@pitt.edu

FOR OFFICIAL USE ONLY			
1. SSN	3. TERM CODE		
2. CLAIM NUMBER	4. WORK-STUDY INITIALS		
RETURNING NEW	TRANSFER		