2009-2010 Military Benefit Disclosure Form

To ensure equity in determination of eligibility among those WBU students serving in the military at their time of attendance, we require that you provide the information on this form concerning rank and benefits. **Contact your campus of attendance for guidance if you or your spouse's military status changes during the 2009-2010 academic year.**

Please Print

Name _____ SS# _____
Last First Middle

Permanent Mailing Address _____
Number & Street Apt. #

_____(____)_____
City State Zip Code Home Phone #

1) Were you active duty military during 2008? Yes ___ No ___ If no, please attach DD-214

2) Where did you live in 2008? _____

3) What is the zip code for the area you/your spouse lived and for how many months did you live there? Zip Code_____ Months_____

4) Indicate you/your spouse's rank (grade) in 2008 (E-1 thru E-9 or O-1 thru O-6)
Student _____Grade/Rank _____Month's _____
Spouse _____Grade/Rank _____Month's _____

5) **Untaxed Income Calculations:** (Attach November or December 2008 LES)
   a. **LES can be retrieved with a pin # @ www.dod.mil/dfas**

	Rate		Months		Total
***BAH**	_____	X	_____	=	_____
	_____	X	_____	=	_____
BAS	_____	X	_____	=	_____
COLA	_____	X	_____	=	_____
CLOTHING	_____	X	1	=	_____
TOTAL UNTAXED INCOME					_____

*http://perdiem.hqda.pentagon.mil/perdiem/bah.html

6) Will you receive Air Force Educational Leave of Absence for the 09-10 year? _____Yes _____No
If you answered "Yes", indicate the amount per semester that you will receive AFELA?
_____Fall _____Winter _____Spring _____Summer

7) Will you receive veteran's benefits (VA) for the 09-10 year? _____Yes _____No
If you answered "Yes", provide the following details about your VA benefits:

Chapter_____ Type_____ Amount per term_____

8) Will you receive Military Tuition Assistance for the 09-10 year? _____Yes _____No
If you answered, "Yes", indicate the amount per semester that you will receive TA?
_____Fall _____Winter _____Spring _____Summer

9) Will you receive Spouse TA for the 09-10 year? _____Yes _____No
If you answered, "Yes", indicate the amount per semester that you will receive SPTA?
_____Fall _____Winter _____Spring _____Summer

Student Signature_____Date_____

Revised: 1/8/2009