

## **Statement of Responsibilities**

Veterans Affairs Office, 2900 Featherstone Rd., Auburn Hills, MI 48326 248.232.4342 • Fax: 248.232.4349 • veteransaffairs@oaklandcc.edu

Name	Student ID Number
<b>ENROLLMENT CERTIFICATION REQUEST - STATEMEN</b>	T OF INTENT
If I wish to use my benefits for a specific semester, I understand that I register for classes. I also understand, only classes listed on the subconsidered for certification eligibility. The OCC Veterans Services deport Intent is not received for a specific semester.	mitted Statement of Intent for the designated semester will be
MITIGATING CIRCUMSTANCES	
I understand that if I receive a "W" or "WS" grade and I wish to have reverences Services office and obtain supporting documentation as soo are circumstances <b>beyond the student's control</b> that prevent the students. See the VA certification checklist of examples.	n as possible, in case the VA requests it. Mitigating circumstances
INCOMPLETES	
I understand that if I receive an incomplete ("I") in a class, the class we the OCC-Veterans Services department when the course is complete been issued, the student's course will be re-certified. Failure to do this	d and a letter grade is issued. Once an appropriate grade has
ELIGIBLE COURSES	
I understand only courses required for the completion of the program Study are eligible for certification. This includes prerequisites for requ	
TRANSCRIPTS FOR PRIOR COURSEWORK	
I understand that I am required by the VA to have all official college ar be evaluated as soon as possible. I am also aware that transfer credit Oakland Community College.	
SATISFACTORY ACADEMIC PROGRESS	
I understand that I will no longer be eligible for certification of VA benedescribed in the <b>OCC Student Handbook</b> located on the OCC websi	
STUDENT CODE OF CONDUCT	
I understand that I will be expected to follow the Oakland Community <b>Student Handbook</b> which can be found on the OCC website. Failure Educational Benefits and possible debt to the VA.	
CHARGES OR FEES	
I will be responsible for any charges or fees levied by OCC related to	my education not covered by my G.I. Bill Educational benefit.

Date \_\_\_