

Veterans Intake Form

Name (Last, First, Middle Initial)

Chapter Benefit

Veteran SSN XXX-XX-XXX

Student SSN (if same as above enter
'Same')

Student ID number (XXX-XXX-XXX)

Phone number (XXX)-(XXX)-(XXXX)

Address (Street Address include apt#,

City, State, Zip)

Date of intake (Today's date)

E-mail address

Attending Grass Valley Campus? Yes No

-----**FOR OFFICE USE ONLY**-----

Applied to Sierra College Complete

Coded for Chapter P D V DD-214 On file Yes No

CA Residency Cleared Yes No

College Transcripts (List Schools)

Complete VA Form 22-1990 Complete

Complete VA Form 22-1995 Complete

Complete VA Form 22-5490 Complete

Complete VA Form 22-5495 Complete

Cal-Vet Fee Waiver Yes No

Submit copy of NOBE (Ch. 1606 only) Complete

Submit Certificate of Eligibility (COE) Complete

Veteran Orientation (Date Attended)

Appointment with Veteran Counselor Yes No

Assessments Reading _____ Math _____ English _____

