



SUPPLEMENTAL INFORMATION FOR CHANGE OF PROGRAM OR REENROLLMENT AFTER UNSATISFACTORY ATTENDANCE, CONDUCT OR PROGRESS

INSTRUCTION: Please furnish the information requested in the Item 3 or 4 checked below. Disregard any item not checked. Also furnish any related information that you would like to have considered when VA evaluates your claim. If more space is required, use the back of this form or attach a separate sheet of paper. Be sure to sign and date the form before returning it to VA.

1. FIRST-MIDDLE-LAST NAME OF VETERAN OR ELIGIBLE PERSON	2. VA FILE NUMBER
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PART I - CHANGE OF PROGRAM

3. YOU HAVE CHANGED YOUR EDUCATIONAL OBJECTIVE (PROGRAM). STATE WHY THIS NEW PROGRAM IS THE RIGHT PROGRAM FOR YOU.

PART II UNSATISFACTORY ATTENDANCE, CONDUCT OR PROGRESS

4. YOUR PREVIOUS SCHOOL STATED THAT YOUR ATTENDANCE, CONDUCT OR PROGRESS WAS NOT SATISFACTORY.

A. STATE WHY YOU HAD UNSATISFACTORY ATTENDANCE, CONDUCT OR PROGRESS.

B. STATE WHAT STEPS OR PRECAUTIONS YOU HAVE TAKEN TO INSURE THAT THE UNSATISFACTORY ATTENDANCE, CONDUCT, OR PROGRESS WILL NOT HAPPEN AGAIN.

C. STATE WHY THIS NEW PROGRAM IS THE RIGHT PROGRAM FOR YOU.

I HEREBY CERTIFY THAT the statements contained herein are true and complete to the best of my knowledge and belief.

5. SIGNATURE OF APPLICANT	6. DATE
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IMPORTANT 

If you have already enrolled in an institutional program (college, university, technical school, etc.), you should complete this form and give it to the Veterans Affairs office at your school. Your school will complete an enrollment certification form (if not previously completed) and send all this information to the appropriate VA Office. If you have not already enrolled in an institutional program, you should complete and return this form to the VA office that sent it to you.

PRIVACY ACT INFORMATION: The information we are requesting is considered necessary to determine your eligibility for additional educational assistance benefits and is requested under authority of title 38, U.S.C., sections 3474, 3524, and 3691. While you are not required to respond, payment to you as a veteran or other eligible person may be delayed or stopped if this form is not completed and returned. The information you submit may be disclosed outside VA only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 58VA21/22, Compensation, Pension, Education, and Rehabilitation Records - VA, published in the Federal Register.

RESPONDENT BURDEN: VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.