



KENTUCKY STATE  
UNIVERSITY

## MILITARY STUDENT SERVICES ENROLLMENT REPORTING FORM

**Note: This form must be completed each term**

**Name:** \_\_\_\_\_

**Student I.D. Number:** \_\_\_\_\_

**Degree Program:** \_\_\_\_\_

**Military Benefit:** ☐ 30 ☐ 31 ☐ 32 ☐ 33 ☐ 35 ☐ 1606 ☐ 1607 ☐ MYCAA ☐ STA  
☐ FTA ☐ ROTC ☐ DWV

**Term:** Fall \_\_\_\_\_ Spring: \_\_\_\_\_ Winter \_\_\_\_\_ Summer \_\_\_\_\_

DEPARTMENT	COURSE NUMBER	SECTION	HOURS	CURRICULUM SHEET	COURSE SUBSTITUTE

1. I must meet with my VA coordinator each semester to update my file and have an advisement session every 30 days
2. ***I must report any changes in my enrollment at Kentucky State University to my VA coordinator immediately.***
3. I must seek a program/major of study by the end of my second semester to continue my VA benefits.
4. I will ensure the courses I take are required or can be used as electives in my program of study.
5. I understand taking a course that is not part of my curriculum sheet and not approved by my department; the VA office will not be responsible for payment
6. If a course has been substituted for another course, I must have a course substitution form signed by my advisor and provide a copy to my VA coordinator.
7. If an add/drop from has been signed by my advisor for a course, I must provide a copy to my VA coordinator.
8. If taking classes through another University I must have the visiting student form approved by my advisor and department chair and provide a copy to my VA coordinator.
9. I understand failure to report any changes to my enrollment will result in restrictions/reimbursements from VA in the future.

VA Students Signature

Date

Military Student Services Coordinator's Signature

Date