



Since 2011



Since 2010

Policies for Degree Programs at Public IHL's with a Component of Flight

Name: _____ Student ID or SSN: _____

Address: _____ City: _____ State: _____ Zip: _____

Preferred Phone: _____ Degree Program: _____

Initials _____ I understand I am required to abide by the policies and rules of SLCC for use of VA educational benefits and the U.S. Department of Veterans Affairs requirements.

Initials _____ I acknowledge that I received a copy of my DegreeWorks Audit which outlines the aviation degree program requirements for my selected major and degree.

Initials _____ I understand that once I enroll in an aviation degree program, I am required to follow the curriculum approved with the intent of earning the degree declared with SLCC.

Initials _____ I am responsible for making progress and showing pursuit in the aviation degree program as approved. **I must enroll in and satisfactorily complete all degree requirements per semester.**

Initials _____ I understand I am required to take general education and program specific courses each term.

Initials _____ I understand that I am required to maintain a satisfactory progress policy for the minimum flight hours per week required of VA students enrolled in an aviation degree program. To ensure this, it is my responsibility to schedule at least 2-3 flights per week to complete my training in a timely manner (extenuating circumstances such as weather, maintenance issues must be documented).

Initials _____ I understand that the VA will only pay tuition and fees based on the following criteria:

- **Initials** _____ My percentage (_____) of eligibility for the Post 9/11 GI Bill as determined by the Department of Veterans Affairs via a current Certificate of Eligibility.
- **Initials** _____ The number of flight training hours required for each flight course as specified on the SLCC Flight Lab Billing Sheet.

Initials _____ I understand that I will not be certified for courses that are added AFTER the add/drop period for the semester/term. I must begin flight training from the start of the semester/term I am registered for.

Initials _____ I will submit all pertinent VA correspondence to the Veterans Services office, including a current Certificate of Eligibility or letter sent to me from the VA each semester, to verify my remaining entitlement. In the event that I run out of entitlement, I understand that I am solely responsible for any tuition and fees due to SLCC.

Initials _____ I understand I must notify Veterans Services at veterans@slcc.edu if I stop attending class for any reason.

Student Signature: _____ Date: _____

Veterans Services Employee: _____ Date: _____