Instructions for Applying for VA Benefits

Required Documents:

- **Certificate of Eligibility** (can be applied for online [here](#), or in person at the nearest VA Office). Allow 30 days for a decision on eligibility. Send to Financial Aid and Registrar’s Office. Information Required:
  - Social Security number
  - Military history
  - Basic information about the school or training facility where you want to attend.
  - Bank account direct deposit information
  - Education history

- **DD-214 Form**, condition of discharge. If you do not have this form, see [here](#) for application procedures. Allow “several weeks to several months” to receive this form from the Department of Defense. Information Required:
  - The veteran's complete name used while in service
  - Service number
  - Social security number
  - Branch of service
  - Dates of service
  - Date and place of birth (especially if the service number is not known).

- **Yale School of Management Veterans Benefits Form** (attached below). Information Required:
  - Current mailing address
  - Social security number
  - Benefit chapter number

Contact:

- Your primary contact for this process will be Joseph Laurito. Phone: 203-432-5490; Email: joseph.laurito@yale.edu
Certification Request for Veterans Affairs Education Benefits

Complete and return to Joseph Laurito (Executive Education). Include a copy of your letter of eligibility from the VA and your Certificate of Discharge: DD214.

Participant Information

Last Name: ____________________ First Name: ______________________ SSN:___________

Current Mailing Address: _________________________________________________________

Telephone Number: _________________________________ Cell phone: □ Home phone: □

Benefit Information

I request that Yale School of Management (SOM) certify my enrollment for VA Education Benefits for:

- [ ] Chapter 31 (Vocation, Rehabilitation, and Employment)  □ Chapter 30 (Montgomery)
- [ ] Chapter 33 (Post – 9/11 GI Bill)  □ Chapter 35
- □ Other (specify): ____________________________________________________________

Student Signature: ______________________________________ Date: ____________________

Office Use Only

Program: _____________________________________________________________

Dates: _______________________________________________________________

Clock Hours: ______________________________ Fees: __________________________

Date Certified with VA – Once: ___________ Certifying Official: _____________________

Shannan Foley
Registrar
Yale School of Management
SOMRegistrar@yale.edu