

# APPLICATION FOR VA EDUCATION BENEFITS (VA FORM 22-1990)

Use this form to apply for educational assistance under the following benefit programs:

- Post- 9/11 GI Bill chapter 33 of title 38, U.S. Code
- Montgomery GI Bill (MGIB) chapter 30 of title 38, U.S. Code
- Montgomery GI Bill Selected Reserve (MGIB-SR) chapter 1606 of title 10, U.S. Code
- Post-Vietnam Era Veterans' Educational Assistance Program (VEAP) chapter 32 of title 38, U.S. Code, or section 901 or section 903 of Public Law 96-342

# INFORMATION AND INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR VA EDUCATION BENEFITS

Do not use this form to apply for Vocational Rehabilitation and Employment benefits (chapter 31 of title 38, U.S. Code), Dependents Educational Assistance benefits (chapter 35 of title 38, U.S. Code), Marine Gunnery Sergeant John David Fry Scholarship (chapter 33 of title 38, U.S. code), Transfer of Entitlement, or National Call to Service (section 510 of title 10, U.S. Code). These benefits require different application forms that can be completed on-line and printed at <a href="https://www.va.gov/vaforms">www.va.gov/vaforms</a> or can be obtained from the nearest VA regional office. They may also be available where you received this application.

INTERNET VERSION AVAILABLE - You may complete and submit this application on-line at <a href="www.benefits.va.gov/gibill">www.benefits.va.gov/gibill</a>. Click "Apply On Line" and select the "Education" option.

VA VOCATIONAL AND EDUCATIONAL COUNSELING HELP AVAILABLE - If you need help planning your individual educational and career goals, VA offers a wide range of counseling services to help you make these decisions. Services include educational and vocational guidance and such testing as necessary for you to develop a greater understanding of your skills, talents, and interests. For further information on VA counseling, call VA toll-free at 1-888-GI-BILL-1 (1-888-442-4551) or TDD at the Federal Relay, 711.

#### PART I

Item 7. The Department of the Treasury requires all Federal benefit payments be made by electronic funds transfer (EFT), also called direct deposit (Direct Deposit is not available for Chapter 32 recipients). To enroll in direct deposit, please attach a voided personal check, deposit slip, or provide the information requested in Item 7. If you *do not* have a bank account, please visit <a href="https://www.benefits.va.gov/benefits.banking.asp">https://www.benefits.va.gov/benefits.banking.asp</a>. This website provides information about the Veterans Benefits Banking Program (VBBP), and a link to banks and credit unions that may fit your needs. You may also call 1-800-827-1000. If you elect not to enroll, you must contact representatives handling waiver requests for the Department of the Treasury at 1-888-224-2950. They will encourage your participation in EFT and address any questions or concerns you may have.

NOTE: The numbers on the instructions match the item numbers on the application. Items not mentioned are self-explanatory.

This section provides an overview of the general eligibility requirements for various education programs. Additional requirements not listed on this form may be necessary.

**NOTE**: A specific single period of service may not be used towards establishing eligibility for more than one benefit. Therefore, once a period of service has been applied toward a specific benefit, that period of service may not be used again toward a different benefit. However, there is one exception to this rule. With regard to Chapter 33, a period of service beginning before August 1, 2011, can be used to establish eligibility to Chapter 33 even if it has already been used to establish eligibility to a different benefit.

### PART II

**ITEM 9A.** You may be eligible for benefits under the Post-9/11 GI Bill, also referred to as chapter 33, if you served at least 90 aggregate days on active duty (excluding entry level and skill training) after September 10, 2001. You may also qualify if you were discharged due to a service-connected disability after serving at least 30 continuous days on active duty after September 10, 2001.

**ITEM 9B.** You may be eligible for the Montgomery GI Bill, also referred to as MGIB or chapter 30, if you served on active duty and meet certain conditions. NOTE: You do not have to be on active duty to apply for benefits under this program. You must meet any <u>one</u> of the following conditions (there are additional requirements):

You first entered service on or after July 1, 1985, and you didn't decline this benefit at your initial entry into service

OR

You entered service (or agreed to delayed entry) before January 1, 1977, and you have educational assistance entitlement remaining under the Vietnam Era GI Bill (also known as "chapter 34")

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You were voluntarily separated under the Voluntary Separation Incentive (VSI) or Special Separation Benefit (SSB) programs and had your military pay reduced by \$1,200

OR

You were involuntarily separated from active duty after February 2, 1991

OR

You were on active duty and a participant in the Post-Vietnam Era Veterans' Educational Assistance Program (VEAP) program on or before October 9, 1996, or you first entered the National Guard under title 32, U.S. Code, between July 1, 1985, and November 28, 1989, you elected chapter 30 benefits between October 9, 1996, and October 8, 1997, and you paid \$1,200

OF

You were on active duty and eligible for VEAP benefits on October 9, 1996, you elected chapter 30 benefits between November 1, 2000, and October 31, 2001, and you paid \$2,700.

**ITEM 9C.** You may be eligible for the Montgomery GI Bill - Selected Reserve Educational Assistance Program, also known as MGIB-SR or chapter 1606, if you are a member of the Selected Reserve and meet certain requirements, including a 6-year commitment. (The Departments of Defense and Homeland Security determine eligibility for this program.)

To expedite processing, attach a copy of your DD 2384, Selected Reserve Educational Assistance Program (GI BILL) Notice of Basic Eligibility. This form is also called a "NOBE." Your reserve unit should have issued this notice to you when you became eligible for the Montgomery GI Bill - Selected Reserve Educational Assistance Program. If you are unable to locate your copy, request a duplicate from your reserve unit.

ITEM 9D. You may be eligible for benefits under the Post-Vietnam Era Veterans' Educational Assistance Program (VEAP), also known as Chapter 32, if your service began on or after January 1, 1977, and before July 1, 1985, and you contributed to a VEAP account.

You may be eligible for benefits under the Post-Vietnam Era Non-Contributory Veterans' Educational Assistance Program, also known as "Non-Contributory VEAP" or Section 903", if your service began on or after November 30, 1980, and before October 1, 1981, and your branch of service paid contributions into your VEAP account.

ITEM 9E. If you are eligible for MGIB, MGIB-SR, OR REAP, you must elect to give up eligibility under the program for which you are eligible in order to receive benefits under the Post-9/11 GI Bill (chapter 33). If you are eligible for more than one of the programs listed (MGIB, MGIB-SR, and REAP), you are only required to give up one of the programs for which you are eligible in order to receive benefits under the Post-9/11 GI Bill. You may not receive more than a total of 48 months of benefits under two or more programs. If you elect chapter 33 in lieu of MGIB, MGIB-SR, or REAP and you have used MGIB in the past, your months of entitlement under chapter 33 will be limited to the number of months of entitlement remaining under the relinquished chapter 30 benefit on the effective date of your election. If you wish to elect to receive benefits under the Post-9/11 GI Bill, check the box next to the program (only check one box) you are giving up.

**NOTE:** An election to give up benefits under an existing program and receive benefits under the Post-9/11 GI Bill is *IRREVOCABLE*. You should carefully consider your decision before completing this section. If you need more information to make a choice, you should visit our website at **www.benefits.va.gov/gibill** or call our toll-free customer service number at 1-888-GIBILL-1 (1-888-442-4551).

#### PART III

ITEM 10A. Self-explanatory, except for the following items:

"Vocational Flight Training." You must already have a private pilot's license. If you are taking an Airline Transport Pilot course, you must have a valid first-class medical certificate on the date that you enter training. For all other flight courses, you must have a valid second-class medical certificate on the date that you enter training.

"National Test Reimbursement." You can be reimbursed for the cost of approved tests for admission to, or credit at, institutions of higher learning.

"Licensing or Certification Test Reimbursement." A licensing test is a test offered by a state, local, or federal agency that is required by law to practice an occupation. A certification test is a test designed to provide affirmation of an individual's qualifications in a specific occupation. Examples include EMT, CPA, MCSE, CCNP, etc.

"Tuition Assistance Top-Up." This benefit is payable only under MGIB and the Post-9/11 GI Bill programs. You can receive benefits to pay for the difference between what the military pays with Tuition Assistance (TA) and the total costs of these courses.

## **PART VIII**

QUESTIONS ARE ONLY FOR APPLICANTS WHOSE SERVICE BEGAN BEFORE JANUARY 1, 1977, (or delayed entry before January 2, 1978). If you are currently married or if you have children under age 18 (under age 23 if in school), you should complete and return VA Form 21-686c. If your children are in school, you should also complete and return VA Form 21-674 for each child. If your parent(s) are dependent on you for financial support, you should complete and return VA Form 21-509. These forms may require additional documentation. VA cannot pay any additional benefits for dependents without properly completed forms and documentation. You can find VA forms 21-686c, 21-674, and 21-509 on-line at <a href="https://www.va.gov/vaforms.">www.va.gov/vaforms.</a>

ITEM 24. If you are certifying that you are married for the purpose of VA benefits, your marriage must be recognized by the place where you and/or your spouse resided at the time of marriage, or where you and/or your spouse resided when you filed your claim (or a later date when you became eligible for benefits) (38 U.S.C. § 103(c)). Additional guidance on when VA recognizes marriages is available at <a href="https://www.va.gov/opa/marriage">www.va.gov/opa/marriage</a>.

## ADDITIONAL HELP

If you need more help in completing this application, call VA TOLL FREE at 1-888-GI-BILL-1 (1-888-442-4551). If you use the Telecommunications Device for the Deaf (TDD), the Federal Relay number is 711. You can also get education assistance after normal business hours at our education Internet site <a href="https://www.benefits.va.gov/gibill">www.benefits.va.gov/gibill</a>.

# HOW TO FILE YOUR CLAIM

Be sure to do the following:

# (A) If you have selected a school or training establishment:

- Step 1. Mail the completed application to the VA Regional Processing Office for the region of that school's physical address. See next page for the addresses of these VA Regional Processing Offices.
- Step 2. Tell the veterans certifying official at your school or training establishment that you have applied for VA education benefits. Ask him or her to send your enrollment information using VA Form 22-1999, Enrollment Certification, or its electronic version.
- Step 3. Wait for VA to process your application and notify you of its decision concerning your eligibility for education benefits.

## (B) If you haven't selected a school or training establishment:

Step 1: Mail the completed application to the VA Regional Processing Office for the region of your home address. See the addresses below of these VA Regional Processing Offices.

Step 2: Wait for VA to process your application and notify you of its decision concerning your eligibility for education benefits.

Eastern Region: VA Regional Office P. O. Box 4616 Buffalo, NY 14240-4616						
SERVES THE FOLLOWING STATES						
CT	DE	DC	MA			
MD	ME	NC	NH			
NJ	NY	PA	RI			
VA VT US Virgin Foreign Schools						
APO/FPO AA						

Central Region: VA Regional Office P. O. Box 32432 St. Louis, MO 63132-0832 SERVES THE FOLLOWING STATES						
СО	IA	IL	IN			
KS	KY	MI	MN			
МО	MT	NE	ND			
ОН	SD	TN	WV			
WI	WY					

Western Region: VA Regional Office P. O. Box 8888 Muskogee, OK 74402-8888							
SERVES THE FOLLOWING STATES							
AK	AL AR AZ						
CA	FL	GA	HI				
ID	LA	MS	NM				
NV	OK	OR	PR				
SC	TX	UT WA					
Guam	Philippines	APO/FPO AP					

Privacy Act Notice: The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or title 38, Code of Federal Regulations, section 1.576 for routine uses (e.g., VA sends educational forms or letters with a veteran's identifying information to the veteran's school or training establishment to (1) assist the veteran in the completion of claims forms or (2) for the VA to obtain further information as may be necessary from the school for the VA to properly process the veteran's education claim or to monitor his or her progress during training) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, and published in the Federal Register. Your obligation to respond is required to obtain or retain education benefits. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by a Federal Statute of law enacted before January 1, 1975, and still in effect. The requested information is considered relevant and necessary to determine the maximum benefits under the law. While you do not have to respond, VA cannot process your claim for education assistance unless the information is furnished as required by existing law (38 U.S.C. 3471). The responses you submit are considered confidential (38 U.S.C. 5701). Any information provided by applicants, recipients, and others may be subject to verification through computer matching programs with other agencies.

Respondent Burden: We need this information to determine your eligibility for education benefits (38 U.S.C. 3471). Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 15 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB (Office of Management and Budget) control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at <a href="https://www.reginfo.gov/public/do/PRAMain">www.reginfo.gov/public/do/PRAMain</a>. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

OMB Control No. 2900-0154 Respondent Burden: 15 minutes Expiration Date: 02/28/2023

Department of Veterans Affairs  APPLICATION FOR VA EDUCATION BENEFITS  (See attached Information and Instructions)						
INTERNET VERSION AVAILABLE - You may complete and send your application over the Internet at: <a href="https://www.benefits.va.gov/gibill.">www.benefits.va.gov/gibill.</a>						
PART	I - APPLICANT INFORMAT	ION				
1. SOCIAL SECURITY NUMBER OF APPLICANT	2. SEX OF APPLICANT	3. APPLICANT'S DATE OF BIRTH				
	MALE FEMALE	Month Day Year  — — — — — — — — — — — — — — — — — — —				
4. NAME (First, Middle Initial, Last)	•					
5. APPLICANT'S ADDRESS						
Number and Street						
	Apt./Unit Nu	mber				
City, State, ZIP Code						
6A. APPLICANT'S TELEPHONE NUMBERS (Include Area Code)						
Primary:	Secondary:					
6B. APPLICANT'S E-MAIL ADDRESS (Required)						
7. DIRECT DEPOSIT (Attach a voided personal check or provide the foliopeposit information.)	lowing information. Direct Deposit is not avail	lable for Chapter 32 recipients. See instructions for additional Direct				
	ount Type	Account Number				
Checking	Savings					
8. PLEASE PROVIDE THE NAME, ADDRESS, AND PH	ONE NUMBER OF SOMEONE WHO WIL	L ALWAYS KNOW WHERE YOU CAN BE REACHED				
A. NAME	B. ADDRESS	C. PHONE NUMBER				
For help with completing this section, please se	ox, check and complete Item 9E, if you ar					
9C. Chapter 1606 - Montgomery GI Bill - Selected Res	serve Educational Assistance Prograr	m (MGIB-SR)				
9D. Chapter 32 or Section 903 - Post-Vietnam Era Vet		am (VEAP)				
<ul> <li>If electing Chapter 33, in lieu of Chapter 30, my m remaining under Chapter 30 on the effective date of</li> </ul>	of benefit entitlement under two or mo onths of entitlement under Chapter 3 of my election. y-Chapter 30 or Selected Reserve-Ch d I relinquished that benefit for the Po	ore of the education programs listed on this application. 3 will be limited to the number of months of entitlement napter 1606) "Kicker" under the Post-9/11 GI Bill, unless ost-9/11 GI Bill-Chapter 33. hapter 33 are not payable prior to that date.				
ACKNOWLEDGEMENT: I elect to receive Chapter 33 edu checked below.	ucation benefits <b>effective</b>	, in lieu of the education benefit				
By checking the box below, I am acknowledging that I undo one of the boxes below may cause a delay in the processin RELINQUISH FOR CHAPTER 33.)						
You MUST check only one box below:						
Chapter 30 - Montgomery GI Bill Educational A	ssistance Program (MGIB)					
Chapter 1606 - Montgomery GI Bill - Selected F Chapter 1607 - Reserve Educational Assistanc if you received 1607 benefits for a semester, quarter the last semester, quarter or term to end prior to No	e Program (REAP). (You are only eligib or term that included the date of Novem	ble to relinquish 1607 (Do Not Write In This Space)				

SOCIAL SECURITY NUMBER OF APPLICANT						
PART III - TYPE AND PROGRAM OF EDUCATION OR TRAINING						
10A. TYPE OF EDUCA	TION OR TRAINING (See	instructions for additional	l information)			
COLLEGE OR OTHER SCHOOL (Including on-line courses)  VOCATIONAL FLIGHT TRAINING  CORRESPONDENCE  NATIONAL TEST REIMBURSEMENT (SAT, CLEP, ETC.)  LICENSING OR CERTIFICATION TEST REIMBURSEMENT (Chapter 30 & 33 only)  (Chapter 30 & 33 only)						
Certification Test R	10B. PROVIDE THE FULL NAME AND ADDRESS OF THE SCHOOL, IF KNOWN (Skip this item if you are only applying for National Test Reimbursement, Licensing and Certification Test Reimbursement, or Tuition Assistance Top-Up)					
10C. PLEASE SPECIF	10C. PLEASE SPECIFY YOUR EDUCATIONAL OR CAREER OBJECTIVE, IF KNOWN (e.g. Bachelor of Arts in Accounting, welding certificate, police officer, etc.)					
		PART IV	/ - SERVICE	INFORMATION		
• DD Form 214 (I • DD Form 2384,	NOTE: It will help VA process your claim if you send a copy of the following:  • DD Form 214 (Member 4) for all periods of active duty service (excluding active duty for training)  • DD Form 2384, Notice of Basic Eligibility (NOBE) if applying for Chapter 1606  • Copies of orders if activated from the Guard/Reserves					
YES NO				the Selected Reserve, or if you are on ac	ctive duty for training)	
12. ARE YOU NOW ON						
	13. PLEASE	COMPLETE THE F	OLLOWING FO	OR EACH PERIOD OF MILITARY	Y SERVICE	
A. DATE ENTERED	B. DATE SEPARATED	C. SERVICE COMPO	, ,	D. SERVICE STATUS (Active duty, drilling reservist, IRR, etc.)	E. WERE YOU INVOLUNTARILY CALLED TO ACTIVE DUTY FOR THIS PERIOD?	
			EXAMP			
9/26/2000 1/18/2005	9/24/2004 8/14/2007	USMC		ACTIVE DUTY DRILLING	NO N/A	
1/16/2005	6/14/2007	USIVIC	N	DRILLING	N/A	
14. VA will assume that you want us to apply every period of service that you have identified in Item 13 above to the single, specific benefit you are applying for in Part II (the benefit chosen between Items 9A thru 9D). However, if there are specific periods of service that you do not want applied to the benefit selected in Part II (Items 9A thru 9D), then please identify in the space below the periods of service and the corresponding benefit program(s) to which you would like them applied.  NOTE: A specific single period of service may not be used towards establishing eligibility for more than one benefit. Therefore, once a period of service has been chosen and applied toward a specific benefit, that period of service may not be used again toward a different benefit. However, there is one exception to this rule. With regard to Chapter 33, a period of service beginning before August 1, 2011, can be used to establish eligibility to Chapter 33 even if it has already been used to establish eligibility to a different benefit.						
PART V - EDUCATION AND EMPLOYMENT INFORMATION						
15A. DID YOU RECEIVE A HIGH SCHOOL DIPLOMA OR HIGH SCHOOL EQUIVALENCY CERTIFICATE? (If "Yes," specify e certificate in Part IX, Remarks)  YES DATE:  NO  15B. DO YOU HOLD ANY FAA FLIGHT CERTIFICATES? (If "Yes," specify e certificate in Part IX, Remarks)  YES NO						

VA FORM 22-1990, FEB 2020 PAGE 2 OF 4

				SOCIAL SEC	JUNITIN	UNIBER OF AFFEIGANT	
15C	. EDUCA	TION AFTER	HIGH SCH	OOL (Including app	renticesh	ip, on-the-job training, an	d flight training)
NAME AND LOCATION OF CO	DATES OF TRAINING NUMBER AND TYPE DEGREE, DIPLOMA,		MA IOD FIELD				
NAME AND LOCATION OF CO OR OTHER TRAINING PROV	-	FROM	то	- , , , , , , , , , , , , , , , , , , ,		OR CERTIFICATE	MAJOR FIELD OR COURSE OF STUDY
				(, £,			
	5D 5M5	N OVACAL A	2.1	:6 1 11 1:			
1	D. EMF	PLOYMENT (	Inly complete	e if you held a licens	1	eyman rating to practice	a profession)
EMPLOYMENT		PRINCIP	AL OCCUPAT	ΓΙΟΝ	NUN	MBERS OF MONTHS WORKED	LICENSE OR RATING
BEFORE MILITARY SERVICE							
AFTER MILITARY SERVICE							
PART	VI - EN	TITLEMEN	IT TO AN	D USAGE OF	ADDIT	IONAL TYPES OF	ASSISTANCE
16. DID YOU MAKE ADDITIONA BENEFITS? IF "YES," IT WIL							☐ YES ☐ NO
SUPPORT YOUR CLAIM (e.							
							ACTIVE DUTY KICKER
<ol> <li>DO YOU QUALIFY FOR A K (Kickers are additional amount</li> </ol>							YES NO
process your claim if you sub							RESERVE KICKER
effective date.							YES NO
18. IF YOU GRADUATED FROM RECEIVED YOUR COMMIS		ARY SERVICE	ACADEMY, SI	PECIFY THE YEAR	YOU GRA	DUATED AND	Graduation Year
19. WERE YOU COMMISSIONE	D AS THE	RESULT OF A	SENIOR RO	TC (Reserve Officers	S Training	Corps) SCHOLARSHIP?	
If you received your commiss	sion throug	gh a non-schola	rship program	, check "No." If "Yes,	" provide t	he date of your	YES NO
commission and the amount your monthly subsistence allo			ch school yea	r you were in the Ser	nior ROTC	program. Don't report	
,	,	. ,					
Scholarship Amounts:							Date of Commission
Year:	Amount:						
Year:	Amount:						
Year:	Amount:						
Year:	Amount:						
	, anounc						
Year:	Amount:						
			_				
20. ARE YOU CURRENTLY PARTUITION, FEES, BOOKS AN						PAYS FOR YOUR	YES NO
21. IF YOU HAD A PERIOD OF							☐ YES ☐ NO
REPAYING AN EDUCATION CONSIDERS AS BEING US	,						
22. FOR ACTIVE DUTY CLAIMA	ANTS ONI	LY: ARE YOU F	RECEIVING, C	OR DO YOU ANTICIF	PATE REC	EIVING, ANY MONEY	□ VES □ NO
(INCLUDING BUT NOT LIMI HEALTH SERVICE FOR THI							YES NO
YOU RECEIVE SUCH BENE							
APPLYING FOR TUITION A	SSISTAN	CE TOP-UP, CH	IECK NO IN T	HIS ITEM.			
23. FOR CIVILIAN EMPLOYEES					,		YES NO
RECEIVING, ANY MONEY (							<b>_</b>

VA FORM 22-1990, FEB 2020 PAGE 3 OF 4

SOCIAL SECURITY NUMBER OF APPLICANT					
PART VII - INFORMATION ON VA EDUCATION BENEFITS					
NOTE: The most current information on VA education benefits is available online at <a href="www.benefits.va.gov/gibill">www.benefits.va.gov/gibill</a> . If you would like to receive a printed pamphlet check here.					
PART VIII - MARITAL AND DEPENDENCY STATUS					
NOTE: Only complete this section if you have military service before January 1, 1977 (or delayed entry before January	ary 2, 1978). See instructions.				
24. ARE YOU MARRIED?					
YES NO					
25. DO YOU HAVE ANY CHILDREN WHO ARE UNDER AGE 18, <b>OR</b> OVER 18 BUT UNDER AGE 23, NOT MARRIED AND ATTENDI PERMANENTLY HELPLESS FOR MENTAL OR PHYSICAL REASONS?	NG SCHOOL, <i>OR</i> OF ANY AGE				
YES NO					
26. DO YOU HAVE A PARENT WHO IS DEPENDENT UPON YOU FOR FINANCIAL SUPPORT?  YES NO					
PART IX - REMARKS					
(If more space is needed, please attach a separate sheet of paper. Be sure to include your name and social security	number on each sheet)				
APPLICATION SUBMISSION REMINDERS					
Did you remember to					
<ul> <li>Write your social security number on each page?</li> <li>Write your complete mailing address?</li> <li>Attach all supporting documents (e.g. voided check, orders, DD214, kicker contract, NOBE, cash collections)</li> <li>Check only one of the boxes below Item 9F of the benefit you are relinquishing in order to receive Chapter</li> </ul>					
IF SO, PLEASE SIGN AND DATE THE APPLICATION BELOW					
PART X - CERTIFICATION AND SIGNATURE OF APPLICANT					
I CERTIFY THAT all statements in my application are true and correct to the best of my knowledge and belief. If or have consulted with an Education Service Officer (ESO) regarding my education program.	active duty, I also certify that I				
<b>PENALTY</b> - Willful false statements as to a material fact in a claim for education benefits is a punishable offense at these or other benefits and in criminal penalties.	nd may result in the forfeiture of				
27A. SIGNATURE OF APPLICANT ( <u>DO NOT PRINT</u> )	27B. DATE SIGNED				

VA FORM 22-1990, FEB 2020 PAGE 4 OF 4