



<p><b>YOU AND THE UNIVERSITY OF MISSOURI ARE OBLIGATED, BY LAW, TO REPORT YOUR ACADEMIC PROGRESS. BY READING, CHECKING, AND SIGNING BELOW, YOU ARE AGREEING TO THE FOLLOWING (PLEASE CHECK ALL BOXES):</b></p>	
<p><input type="checkbox"/> <i>I agree to notify the MU Veterans Center in writing if I make changes to my enrollment including withdraw from the University for any reason, including graduation.</i></p>	
<p><input type="checkbox"/> Changes to your enrollment might result in a overpayment by the VA and you owing a debt to the VA.</p>	
<p><input type="checkbox"/> I understand that MU will release information to the VA to include any requested student records and/or transcripts.</p>	
<p><input type="checkbox"/> <b><u>Online Self-Paced Courses</u></b>                  The VA policy for certifying self-paced courses states they are to be certified <b>AFTER</b> the course is completed. When the course is complete notify our office for certification. This could affect your fulltime status with the VA. If you have any questions, please contact the MU Veterans Center.</p>	
<p>I authorize the information provided on this form to be released to the VA by the MU Veterans Center. I authorize MU to submit to the VA, any changes that may occur which affect my benefit payments and to share academic information and personal information as required by the VA. I understand that this information may include Social Security number, address, academic information, and rate of academic progress. I have read the above statements; I understand them, and my signature signifies my agreement.</p>	
SIGNATURE:	Date:

**Please return form to:**

**University of Missouri Veterans Center  
 N5 Memorial Student Union  
 Columbia, MO 65211**

**You may email the form to [veterans@missouri.edu](mailto:veterans@missouri.edu) or fax this form to (573) 884-4387.**

**If you have any questions, please call 573-884-4383.**

**THANK YOU FOR YOUR SERVICE.  
 WE ARE HONORED TO HAVE YOU HERE!**