



Request for Participation in the Yellow Ribbon Program

*Before completing this form, please be advised:

- ✓ Yellow Ribbon funds are awarded on a first-come, first-served basis.
- ✓ Submitting this form does not guarantee that funds will be available.
- ✓ Yellow Ribbon funds may not cover the entire balance due each semester.
- ✓ Active duty service members and their spouses **are not** eligible for the Yellow Ribbon Program

Please enter a response for each item below. When you have completed the form, sign and date it, and submit it to the VETS Center in person, or by U.S. Mail, email or fax.

Name: _____ Campus ID #: _____

ASU Email: _____@angelo.edu

Phone: _____ Classification: ☐ Undergraduate ☐ Graduate

I am a ☐ NEW ☐ RETURNING ASU Student. If returning, last term attended: _____

To be eligible for participation in the Yellow Ribbon Program, you must:

- Be enrolled (registered) for one or more courses for the next available semester or term.
- Have a complete file with the VETS Center: DD214 (Veterans only), Certificate of Eligibility and current Request for Certification of Enrollment on file, and degree plan filed with academic department.
- Be eligible for Chapter 33 Post-9/11 GI Bill benefits at the 100% rate and **NOT** be an active duty service member or spouse.

Statement of Understanding:

I understand that, by requesting participation in the Yellow Ribbon Program, I am responsible for reporting any changes in my Post-9/11 GI Bill eligibility, residency status, or class schedule to the ASU VETS Center immediately. Failure to report such changes may cause a debt to VA or ASU that will be my responsibility to repay. I understand that I must request participation in the Yellow Ribbon each semester or term to continue to receive it.

By signing below, I certify that:

- ✓ I understand the eligibility requirements for the Yellow Ribbon Program
- ✓ I have read the Statement of Understanding
- ✓ The information contained on this form is true and correct to the best of my knowledge

Signature: _____ Date: _____

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