The following form can be filled out **Online,** printed for signatures, then mailed or faxed.

To fill out forms in Acrobat Reader:

- Select the “hand” tool.
- Click on a line or in a box and begin typing.
- Check boxes can be clicked on or off.
- To move from one editable area to the next, use the tab key.
- If you prefer, the “Highlight Fields” option can be selected to show the editable areas on the form, and the zoom tool in the browser can be used to enlarge the form view.
- When printing the form, start with page 2 of this PDF document.
- For best results, we recommend the latest version of Acrobat Reader.

Community Colleges of Spokane

Spokane Falls Community College
VETERAN PAYMENT CONTRACT FOR CHAPTER 33 BENEFITS

Name_____ SID ___ – __ – ____

Quarter: ❑ Fall ❑ Winter ❑ Spring ❑ Summer

ESTIMATED CHAPTER 33 TUITION BENEFITS:

Based on the information you have provided, we estimate you will receive approximately _____% tuition from the Veterans Administration.

Tuition and fees:	$_____	❑ Estimate ❑ Actual
Estimated Chapter 33 tuition benefit:	$_____	
***Estimated* tuition balance you must pay:**	**$**_____	
The tuition balance must be paid no later than _____		

I understand that:

- ❑ I am responsible for paying the full tuition payment each quarter.
- ❑ If the amount of tuition paid by the VA office differs from the estimated Chapter 33 tuition benefits listed above, I am responsible for paying the difference.
- ❑ If my tuition is not paid in full, I will not be able to register for classes next quarter.
- ❑ If my tuition is not paid it will be sent to a collection agency.
- ❑ If I decide to add/drop classes, I must see the veterans coordinator first.

Student signature_____ **Date**_____

Veteran's Office Staff Signature_____ **Date**_____