



Office of Veterans Services  
 5500 North St. Louis Ave., LIB-449  
 Chicago, IL, 60625-4699  
 (773) 442-4005 | veterans@neiu.edu

## Academic Advising Verification Form

*To Be Completed By Student:*

Student Name: \_\_\_\_\_ NEIU ID# \_\_\_\_\_

NEIU Email: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Fall 20____ Spring (Winter) 20____ Summer 20____	Chapter 33 – Post 9/11 Rogers STEM Chapter 35 – DEA/Fry	Chapter 30 – MGIB Chapter 1606 – MGIB - SR
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- I expect to graduate at the conclusion of this semester?      Yes                  No
- Yes, I understand this form must be submitted every semester I use VA benefits.
- Yes, I understand I must immediately report any dropped class to NEIU Veterans Services.
- Yes, I understand full-time status is required for full VA benefits.
- Ch. 33 ONLY: Yes, I understand at least one on-campus class is required for full VA benefits.

Course Prefix & Number (Art 101)	Course Title	Credit Hours	100% Online? Y/N	Applicable Towards Degree or Program? Y/N

Student Signature: \_\_\_\_\_ Total Credits: \_\_\_\_\_ Date: \_\_\_\_\_

*To Be Completed By Academic Advisor:*

I am authorized to function as an academic advisor for the above-mentioned student and have verified their major, graduation status, and the criteria of all courses listed above.

Academic Advisor Print Name: \_\_\_\_\_

Academic Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Once verified by student's academic advisor, students must email this form to NEIU Veterans Services at [veterans@neiu.edu](mailto:veterans@neiu.edu), or they may drop it off at the Ronald Williams Library: LIB-449**