

Aquinas College
Office of the Registrar
4210 Harding Rd. Nashville TN 37205-2005
(615) 297-7545 ext. 414 or 432 FAX (615) 279-3890

YELLOW RIBBON PROGRAM APPLICATION

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Please initial the following statements:

_____ I have applied for the Post 9/11 GI Bill <http://www.gibill.va.gov/>.

_____ I understand that the Department of Veteran Affairs formally establishes eligibility for the Post 9/11 GI Bill's Yellow Ribbon Program and that this request for participation is contingent upon the Department of Veterans Affairs' approval for such benefits.

_____ I understand that I must be 100% eligible for the Post 9/11 GI Bill as determined by the Department of Veterans Affairs.

_____ I understand that this application will be considered incomplete until my Certificate of Eligibility provided to me by the Department of Veterans Affairs is included with this application (applications may be submitted prior to submitting a Certificate of Eligibility).

_____ I am currently an enrolled and degree seeking Aquinas College student.

_____ I acknowledge that the Yellow Ribbon Program funds are distributed on a first-come, first-serve basis, measured from the date that this Request for Participation form is received.

_____ I understand that submitting this form does not guarantee my admittance into the Yellow Ribbon Program.

_____ I understand that Aquinas College is not required to continue making Yellow Ribbon Program contributions if I am not in good academic standing.

_____ I understand that if I withdraw from class(es), applicable tuition and fees will be refunded per the Aquinas College Refund Policy and monies to be returned to the Department of Veterans Affairs will be my responsibility.

Signature _____ Date _____

Internal Use Only

Date & Time Application Received: