



HARVARD EXTENSION SCHOOL

Student Financial Services • 51 Brattle Street, Cambridge, MA 02138-3722 • (617) 495-4293 • militarybenefits@extension.harvard.edu

On-Campus Training Verification Form for VA Benefits

With a completed On-Campus Training Verification Form on file, the Student Financial Services Office will be able to report your enrollment in an **On Campus or Online** course to the VA as resident training.

For Harvard Extension/Summer School students enrolled in an **On Campus or Online** course, there are three options for attendance: you can attend in person, attend live online in real time, or watch the recordings of class and participate on demand. You can choose how you'd like to attend on a week-to-week basis.

Instructions to Veteran Student

Veteran students enrolled in an **On Campus or Online** course can use this form to verify in-class attendance for the course listed below. To verify your attendance, complete and sign this form and obtain the instructor's signature. Keep a copy for your records. You may submit the completed form by uploading it with the Document upload tool (accessible by logging into your student account), or you may email it to militarybenefits@extension.harvard.edu.

To be completed by student

Please print clearly

STUDENT FULL LEGAL NAME (exactly as printed on your passport or other government-issued photo identification)

Last/Family/Sur name(s)	First/Given name(s)	Middle name(s)
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DCE ID NUMBER

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I am enrolled in the following online option course at the Extension/Summer School:

5-DIGIT COURSE NO.	SUBJECT	SUBJECT NUMBER	COURSE TITLE AND SECTION NUMBER, IF APPLICABLE

I hereby certify that I have attended the above course in person on the Harvard campus on the date noted in the Instructor section of this form.

Student Signature _____ Date _____

To be completed by Instructor

By completing and signing this form you are confirming the student named above was in attendance in your course for the entire session listed on the date below.

I acknowledge the above named student's in-person attendance on: _____ (Date)

Instructor's Signature _____ Date Signed _____

Print Name _____ Email Address _____

Phone Number _____