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

<table>
<thead>
<tr>
<th>STUDENT FULL LEGAL NAME</th>
<th>(exactly as printed on your passport or other government-issued photo identification)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last/Family/Surname(s)</td>
<td>First/Given name(s)</td>
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</table>

DCE ID NUMBER

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

<table>
<thead>
<tr>
<th>S-DIGIT COURSE NO.</th>
<th>SUBJECT</th>
<th>SUBJECT NUMBER</th>
<th>COURSE TITLE AND SECTION NUMBER, IF APPLICABLE</th>
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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______________________________________________________________