

VA- ACADEMIC APPROVAL FORM

Students applying for Veteran Benefits, are required by the VA to provide their School Certifying Official with a signed copy of their approved courses for the Academic Term in question. Please have your Academic Advisor review and approve your registered courses. Return the completed form to the Financial Aid & Awards Office.

Section 1 Student Identification						
Last Name	First Name			Date		
				(dd/mm/yyyy)		
Student ID	Academic Term			Academic Year		
Section 2 Details of Studies						
Faculty: Arts & Science JMSB ENG/Comp Science Fine Arts Independent Student						
Level of Studies						
Major: Specialization:						
Anticipated Program Completion Date:						
Graduate MA/PhD: Please indicate student status for the current academic term						
Full-time Status CIP Part-time Status Leave of Absence Completed Studies						
Section 3 Course Information (Do not included Waitlisted Courses)			For Office Use Only			
Course Name and Number		Credit	•	Percentage	REPT	ONLINE
			Program			
						_
Total Course Load Percentage:	Progra	m Code:	Year of			
Section 4 Declaration and Signature						
				l		
Signature of the School Official: First and Last Name:			Date: (dd/mm/yyyy)			

Notice of collection of Personal Information

The personal information on this form is collected in accordance with the Act respecting Access to documents held by public bodies and the Protection of personal information (R.S.Q., chapter A-2.1 Quebec) and with Concordia University's Policy Concerning the Protection of Personal Information (SG-9). For more information, please visit the Office of the Secretariat online at: https://www.concordia.ca/about/administration-governance/secretariat.html

