STATE OF NEW JERSEY • HIGHER EDUCATION STUDENT ASSISTANCE AUTHORITY

2024-2025 Veterans Educational Benefits Statement

Student's Name:_____ **NJHESAA ID #:**_____
Last **First** **M.I.**

INSTRUCTIONS

- **You are required to complete this form because you answered "Yes" to "The student is a Veteran of the U. S. Armed Forces", question #5 on your FAFSA application. (Provide form DD214 member - 4)**

- Will you receive veteran's educational benefits between July 1, 2024 and June 30, 2025?
  - ☐ Yes, I will receive VA educational benefits
  - ☐ No, I will not receive VA educational benefits.

If yes, provide information on the type of VA benefits, the monthly amount and the number of months for which you will receive these benefits in the section below.

Type of Veterans Benefits Received	Y/N	Monthly Amount	Number of Months
Montgomery GI Bill Active Duty (Chapter 30)	☐ ☐		-
Post 9/11 GI Bill (Chapter 33)	☐ ☐		-
Montgomery GI Bill Selected Reserve (Chapter 1606)	☐ ☐		-
Reserve Educational Assistance Program (Chapter 1607)	☐ ☐		-
Vocational Rehabilitation and Employment (Chapter 31)	☐ ☐		-
Dependents' Educational Assistance (Chapter 35)	☐ ☐		-
Any other type of veterans education benefits	☐ ☐		-

I certify that the information above is correct and complete to the best of my knowledge.

Required Student's Signature: _____ Date:_____

PRINT AND SIGN

To submit this form along with supporting Documentation, log into NJFAMS, go to your "To Do List", and select "Upload Document" for the document you are uploading. To view Grants & Scholarships instructions visit: https://www.hesaa.org/Pages/uploaddocuments.aspx.

Revised 2/22/2024