STATE OF NEW JERSEY • HIGHER EDUCATION STUDENT ASSISTANCE AUTHORITY 2023-2024 Veterans Educational Benefits Statement			
Student's Name: Last First			
INSTRUCTIONS			
 You are required to complete this form because you answered "Yes" to "Are you a Veteran of the U. S. Armed Forces", question # 46 on your FAFSA application. (Provide form DD214 member - 4) 			
Will you receive veteran's educational ber July 1, 2023 and June 30, 2024?	nefits bo	etween	
□ Yes, I will receive VA educational benefits			
\Box No, I will not receive VA educational benefits.			
If yes, provide information on the type of VA benefit you will receive these benefits in the section below.	s, the m	nonthly amount and the num	mber of months for which
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 cor	rect and	l complete to the best of my	knowledge.
Required Student's Signature: Date:			
PRINT AND SIGN			
To submit this form along with supporting Documentation, visit <u>www.njgrants.org</u> , click on "Grants' tab, then select "Upload documents", then select the year.			

11/29/22