



**Financial Aid Office**  
 2121 Euclid Avenue, Cleveland, OH 44115  
 Phone: (216) 687-5411 Fax: (216) 687-9247  
 For in-person inquiries, please visit Campus411 All-in-1, MC 116  
<http://www.csuohio.edu/financial-aid/financial-aid>

## 2016-2017 Veteran Status Verification

_____	_____	_____
Last Name	First Name	CSU ID #
_____	(____)_____	(____)_____
Email Address	Phone Number (Home)	Phone Number (Cell)

According to information we received from the Department of Veterans Affairs, your veteran status has not been confirmed. Please complete and sign this form, attach the required documentation and return it to the Financial Aid Office.

\_\_\_\_ I was engaged in active service in the U.S. Armed Forces (Army, Navy, Air Force, Marines, or Coast Guard), or was a member of the National Guard or Reserves enlistee who was called to active duty for other than state or training purposes, or was a cadet or midshipman at one of the service academies, *and* was released under a condition other than dishonorable.

*Please submit the DD-214 Certificate of Release or Discharge from Active Duty, completed through Block 30. If you need to obtain a copy of your DD214, please contact the U.S. Department of Veterans Affairs at 1-800-827-1000.*

\_\_\_\_ I am currently engaged in active service in the U.S. Armed Forces (Army, Navy, Air Force, Marines, or Coast Guard), or I am a member of the National Guard or a Reserves enlistee who was called to active duty for other than state or training purposes, or I am a cadet or a midshipman at one of the service academies, *and* will be released under a condition other than dishonorable.

*Please submit official documentation (from your branch of the service) of your anticipated release date from active duty.*

\_\_\_\_ I do not meet the conditions above and I am not considered a veteran.

*For financial aid purposes you are considered "dependent" and you will therefore need to add all of your parent's information (personal, financial and electronic signature) to your 2016-2017 FAFSA.*

Please contact Campus 411, All-in-1 if you have any questions or need help completing this form.

\_\_\_\_\_  
 Student's Signature

\_\_\_\_\_  
 Date