NORTH CENTRAL TEXAS COLLEGE
Office of Financial Aid & Veteran Services
INFORMATION SHEET

NCTC School Certifying Officials (SCO)
Gainesville, Graham & Bowie Campuses: Zoanna Lax finaid@nctc.edu
Corinth, Denton & Flower Mound Campuses: Colleen Jacobs, Stanja Zylowski finaid@nctc.edu

NAME:_____ **DATE**: _____

STUDENT ID: _____ **SSN NUMBER/Last 4** _____

ADDRESS: _____

CITY/STATE/ZIP:_____

PHONE: _____**E-MAIL**: _____

CHECK WHICH VA BENEFIT YOU WILL BE USING:

- ☐ Post 9/11 Veterans Educational Assistance Program (Chapter 33**)**
- ☐ Montgomery GI Bill-Active Duty Educational Assistance Program (Chapter 30)
- ☐ Veterans Readiness & Employment VR&E (Chapter 31)
- ☐ Montgomery GI BILL- Selected Reserve Educational Assistance Program (Chapter 1606)
- ☐ Dependents/Survivor DEA (Chapter 35)
- ☐ Other

STARTING SEMESTER:_____**PRIMARY CAMPUS**_____

LIST ALL PRIOR COLLEGES AND/OR UNIVERSITIES YOU HAVE ATTENDED:

_____

_____

Please read: *By signing below I certify that I plan to use my VA benefits to pursue a degree at North Central Texas College. I understand that only classes required for the completion of this degree can be submitted to VA for payment. I understand I must provide official copies of all prior college and military transcripts in order for coursework to be VA certified. If I am unable to provide all prior transcripts within the first semester of enrollment, I understand a hold will be placed on my student account and remain there until I have turned in all required documents. I also agree to report any changes to my class schedule to my SCO.*

_____ _____
Veteran or Dependent Signature ***Date***

Last updated October 24, 2025