VETERAN/ACTIVE DUTY CLARIFICATION FORM
(Note: Deadline for returning this form to PHEAA is April 1, 2023)

Print Student’s Name ___________________________

Student’s Account Number ___________________________

OR

Social Security Number ___________________________

In order to receive special processing as an independent student due to being active duty military, as of the day the FAFSA was filed, you must have been serving on active duty in the U.S. Armed Services for purposes other than training. If you are a National Guard or Reserves enlistee, you must have been called to active duty for other than state or training purposes. **If you are currently on active duty, you must submit copies of your current orders or a letter from your unit commander documenting your active status.**

To be eligible for special treatment as a veteran within the State Grant Program, a student must have either: 1) engaged in active duty service in the United States Army, Navy, Air Force, Marines, or Coast Guard, or 2) been a cadet or midshipmen at one of the service academies. The veteran must also have received a discharge that was not dishonorable, bad conduct, or other than honorable conditions; or is not a veteran now but will be by June 30, 2023.

Those NOT eligible for veteran status within the State Grant Program include ROTC students and National Guard or Reserve enlistees who were not activated for duty for other than State or training purposes. If you are not a veteran solely because you have not been released or separated, please complete questions 2 through 5 below. **If you are a veteran, you must submit a complete copy of your separation certificate (DD Form 214), which includes the type of discharge.**

1. Are you a member of the U.S. Armed Services currently serving on active duty? _________________

2. Are you a veteran in accordance with the definition referenced above? _________________

3. Indicate the branch of service in which you served or are currently serving. _________________

4. Indicate your date of entry into active duty service. ___________________________ Month/Day/Year

5. Indicate your date (or anticipated date) of release from active duty service. ___________________________ Month/Day/Year

6. Specify the type of separation or discharge (Honorable, General, Bad Conduct, Other than Honorable Conditions, Dishonorable, etc.). _________________

THE PENALTY FOR SUBMISSION OF FRAUDULENT INFORMATION ON THIS FORM MAY BE REPAYMENT OF TRIPLE ANY AMOUNT OF MONEY RECEIVED PLUS A FINE AND/OR IMPRISONMENT.

______________________________________________

Signature of Student ___________________________

Date ___________________________

Send your response via email to granthelp@pheaa.org, by fax at (717) 720-3786, or mail to: PHEAA, P.O. Box 8157, Harrisburg, PA 17105-8157.