What is a Parent Institution Letter (PIL):

- A Parent Institution is the primary school from which the student will earn their degree.
- A Supplemental Institution is the school in which the student is enrolled to take courses which will satisfy requirements at the primary school.

In order to approve benefits for enrollment at a supplemental school, the VA must receive confirmation from the Parent School that a student is entitled to receive full credit in his/her approved educational program for the course(s) he/she plans to take.

Student Responsibilities:

1. All students must gain approval from their Academic Dean before enrolling in courses at another school.
2. Please list the course name, number and description of the course(s) you are enrolling for at your supplemental school.
3. Take this form to the Academic Dean of your major at your parent school for approval & signature.
4. Submit this PIL form to the TTU Military & Veterans Programs Department (MVP).
5. MVP will email the form to the supplemental school.
6. A copy of the PIL will be emailed to the student.
7. Contact the VA Certifying Official at the supplemental school to verify receipt of the PIL and follow any additional instructions provided. Do not fill out a 22-5495 or 22-1995, Request for Change of Program form at the Supplemental School as this would indicate a transfer to that school.
   a. Note: Chapter 33 students will need to provide a copy of their most recent Certificate of Eligibility Letter to the Supplemental School.
   b. All veterans will need to submit a copy of Member 4 of their DD214.
8. The Supplemental School’s VA Certifying Official will certify the approved courses taken at the supplemental school to the VA.
9. For classes taken concurrently at TTU, submit a MVP Certification form to the MVP Department.
10. Request an official transcript be sent to TTU Transfer Evaluation Office, Box 45015, Lubbock, Texas 79409-5015, once the supplemental course grades have been posted.
11. Submit an unofficial copy of the transcript to the MVP department.
12. Contact MVP as needed for any questions.

I understand my student responsibilities: Signature __________________________ Date: ____________

MVP Staff Responsibilities:

1. Enter course information onto the degree plan on file so that we can see the course is being taken at a supplemental school.
   a. Semester, School
      i. Example: 201527 SPC
2. Give the form to a MVP VA Certifying Official to sign.
3. The VA Certifying Official will send the form via Email to the supplemental school’s VA Certifying Official or will designate a MVP staff member to do so.
   a. Make certain you courtesy copy the student.
4. Log the PIL info onto the PIL Information Sheet for that semester.
5. Verify course completion as transcripts are received.

www.mvp.ttu.edu
Parent Institution Letter
Semester & Year ________________

**This form is invalid unless the Academic Dean and the Certifying Official have both signed it, unless the waiver box is checked by the TTU MVP VA Certifying Official.**

Date: _______________ R#: _______________ Parent School
Texas Tech University
Military & Veterans Programs
Attn: VA Certifying Officials
P O Box 45026
Lubbock, TX. 79409-5026

Name: __________________________________________
Address: _________________________________________
Email: ___________________________________________
Phone: ___________________________________________

Chapter: _________________________________________
File #: __________________________________________

SSN (if Different): ______________________
Major: _________________________________

Supplemental School Name: ______________________
Attn: VA Certifying Official: ______________________
Email: _________________________________________
Phone: _________________________________________
Address: _______________________________________
Fax: ___________________________________________

Supplemental School Courses

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TTU Transfer Equivalent Courses

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Academic Dean’s Office Signature Only

Attention Academic Dean: Please list the TTU Equivalent Courses for the Supplemental Courses named above. Only sign this form if the student is allowed to attend the supplemental school and if courses named above will transfer to the degree listed.

Date Print Name Signature of Academic Dean or Authorized Personnel of Parent School

For MVP Use Only

Student (IS/IS NOT) concurrently certified at parent school in ___ hours.

Date Print Name Signature of VA Certifying Official

☐ Student is waived from getting the Dean’s signature       Reason ________________________________

*Form Effective Date: 8-1-14*