



MILITARY PAYMENT PLAN ENROLLMENT REQUEST

Student R# _____

Semester _____

NAME: _____

DATE: _____

I hereby authorize the Texas Tech University Student Business Services to process my requested enrollment into the Military Payment Plan. Consequently, I agree to and understand the following:

- I am eligible for, and intend to use the State and/or Federal benefits selected below.
- Enrollment into this plan will prevent cancellation of my registration.
- I will notify the Sponsored Student Advisor and the Office of Military and Veterans Program of any changes to my program, registration, or my benefit eligibility.
- This agreement does not relieve me from any financial responsibility to Texas Tech University.
- If military benefits are not utilized for the term, the \$25 military payment plan fee will be added to the student billing account.

I intend to use the following benefits during the semester listed above (Check all that apply):

____ Montgomery GI Bill® (CH. 30)

____ Veteran Readiness and Employment (CH.31)

____ Post 9/11 GI Bill® (CH. 33)

____ Montgomery GI Bill® - Reserve (CH. 1606)

____ VEAP (CH. 32)

____ Hazlewood Exemption

____ Other (please list) _____

*GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S. government Web site at <https://www.benefits.va.gov/gibill>.

My signature below certifies my enrollment into the Military Payment plan. This request is only valid for the term listed above.

STUDENT SIGNATURE: _____

SUBMISSION INFORMATION:

Submit Military Payment Plan Enrollment Request to Student Business Services in 301 West Hall, via email to sbs@ttu.edu or by fax to 806-742-5910