

	In Reply Refer To:
Dear	
The law requires that we collect some informative sent you on .	tion about the accelerated payment of \$
If you don't answer before of \$, you must return the Accelerated Payment
You must sign and return this form to our office the address at the top of this letter or FAX it to you'll be required to pay back \$	
Sincerely,	
Education Officer	OMB 2900-0636 Respondent Burden: 5 Minutes Expiration Date: XXX_XXXX
ACCELERATED PAYMEN	IT VERIFICATION OF COMPLETION
Reminder: You must sign and return this form. your accelerated payment.	If you don't you'll be required to pay back the full amount of
1A. DID YOU INCREASE OR DECREASE THE NUMBER OF CREDIT/HOURS PURSUED?	1B. SPECIFY INCREASE OR DECREASE 1C. NUMBER OF HOURS ☐ INCREASE ☐ DECREASE
YES NO (If "Yes," complete Items 1B thru 1D)	1D. DATE THE CHANGE IN HOURS OCCURRED
2A. DID YOU SUCCESSFULLY COMPLETE THE COURSE(S)?	2B. DATE YOU LAST ATTENDED
YES NO (If "No," complete Items 2B thru 2C)	
2C. EXPLAIN WHY YOU DIDN'T COMPLETE THE COU	JRSE

VA FORM

3. HOW DID YOU USE YOUR PAYMENT? (Check the box that best describes how you used the majority of your payme information is being collected for statistical purposes only)	ent. There is no right or wrong answer. This	
☐ EDUCATION RELATED ITEMS (TUITION, FEES, BOOKS, SUPPLIES, ETC.)		
PERSONAL ITEMS (ROOM, BOARD, LIVING EXPENSES, ETC.)		
☐ SAVINGS OR CHECKING ACCOUNT		
☐ TRAVEL OR ENTERTAINMENT		
☐ LOAN REPAYMENT		
OTHER (Please specify)		
4. REMARKS		
I CERTIFY THAT the information given is true and correct to the best of my knowledge.		
5A. SIGNATURE OF STUDENT	5B. DATE SIGNED	
PRIVACY ACT NOTICE		
VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education and Vocational Rehabilitation Records - VA, and published in the Federal Register. For example, a routine use that allows VA to send educational forms or letters with an individual's identifying information to the individual's school or training establishment to (1) assist the individual in the completion of claims forms or (2) for VA to obtain further information as may be necessary from the school for VA to properly process the individual's education claim. Your obligation to respond is required to obtain or retain education benefits. If you do not respond, VA must collect the payment made to you under 10 U.S.C 16131a, 16162a, or 38 U.S.C. 3014A. The responses you submit are considered confidential (38 U.S.C. 5701). Any information provided by applicants, recipients, and others may be subject to verification through computer matching programs with other agencies.		
RESPONDENT BURDEN		
We need this information to confirm your entitlement to the accelerated payment we is	sued to you (10 U.S.C. 16131a,	

16162a, 38 U.S.C. 3014A). Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 5 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.reginfo.gov/public/do/PRAMain. If desired, you can call 1-888-GI-BILL-1 (1-888-442-4551) to get

information on where to send comments or suggestions about this form.

VA FORM 22-0840, XXXX