OMB Approved No. 2900-0162 Respondent Burden: 30 minutes Expiration Date: XX/XX/XXXX

Department of Veterans Affairs MONTHLY CERTIFICATION OF FLIGHT TRAINING									
IMPORTANT: Read Important Notice, Privacy Act Notice and Instructions on reverse before completing this form.									
1. FIRST-MIDDLE-LAST NAME OF STUDENT 2. FILE NUMBER			3. REPOF			3. REPORTING	RTING PERIOD		
					A. BEG	GINNING DATE	B. ENDING DATE		
4. ADDRESS OF STUDENT (Complete only if this is a change from your address of			record))	5. IF TRAINING WAS COMPLETED OR TERMINATED DURING REPORTING PERIOD, GIVE DATE (State reason in Item 12)				
6. NAME OF CURRENT COURSE						F CURRENT COURSE			
7. FLIGHT INSTRUCTION FURNISHED FOR CURRENT COURSE DURING REPORTING PERIOD									
	NSTRUCTION	B. HORSE POW		C. HC		D. RATE	E. AMOUNT		
						\$	\$		
8A. COST TO STUDENT FO	\$								
8B. STATE AND LOCAL SALES TAXES (If applicable)							\$		
8C. TOTAL COST TO STUDENT THIS REPORTING PERIOD (Including taxes, if applicable)							\$		
9. TOTAL COST TO STUDE	\$								
	10. SUMMARY OF TOT	1	SE TH	ROUGH Er	ND OF KER				
TYPE OF INSTRUCTION	MAXIMUM APPROVED	HOURS GIVEN TO DATE	Т	YPE OF INS	TRUCTION	MAXIMUM APPROVED	HOURS GIVEN TO DATE		
A. DUAL DUAL SIMULATOR] ,	C. PRE-FI AND POST					
(Do not include in dual above)				D. GROU	JND				
B. SOLO				E. OTHE	R				
11. REMARKS (Indicate any sui			se)						
CERTIFICATION: WE CERTIFY THAT the above entries are true and correct.			124	CICNATUDE		N CERTIFYING OFFICIAL	L 13B. DATE SIGNED		
12. PRINTED NAME OF SCHOOL CERTIFYING OFFICIAL				13A. SIGNATURE OF SCHOOL CERTIFYING OFFICIAL (Sign in ink)					
14. NAME AND ADDRESS OF FLIGHT SCHOOL			15. FACILITY CODE						

INSTRUCTIONS FOR STUDENTS

- 1. You and the school should complete this form after the last day of the month unless you interrupt or complete your course before the end of the month
- 2. VA cannot release your check until we receive this form with all items completed. Prompt return of this form will result in early release of your payment.
- 3. Check all entries to be sure they are correct. Errors or omissions can delay payment.

INSTRUCTIONS FOR FLIGHT SCHOOL OPERATORS

- 1. You will expedite the student's payments by sending these certifications to the appropriate Regional Office. These certifications are due to VA as early as possible after the end of the month in order to effect prompt payment.
- 2. Item 3: Show the beginning and ending dates for the reporting period during which the student received training.
- 3. Item 6: Show the name of the course the student is pursuing. If the student completes or interrupts the course for any reason, enter the date in Item 5, and the reason in Item 12.
- 4. Item 7: Report each type of instruction separately, as shown in the example below. Flight time should be reported in accordance with Part 1.1 of FAR 1, i.e., from the moment power is applied for the purpose of flight until the time the plane lands and taxis to a final rest.

A. TYPE OF INSTRUCTION	B. HORSEPOWER	C. HOURS	D. RATE	E. AMOUNT
GROUND SCHOOL		4.0	\$8.00	\$32.00
PRE-FLIGHT/POSTFLIGHT		1.5	10.00	15.00
SOLO	100	2.0	25.00	50.00
DUAL	150	3.0	40.00	120.00
FLIGHT TRAINING DEVICE		2.0	10.00	20.00

- 5. Item 8: Report the total charges for instruction given during the reporting period shown in Item 3.
- 6. Item 9: Report the total charges incurred from the beginning of the course through the end of the current reporting period. If student enrolls in a new flight course during the period, separate certifications must be submitted for both courses.
- 7. Item 10: Report the maximum hours approved and the cumulative hours completed for each type of instruction through the end of the current reporting period. NOTE: Flight instruction in any category, including type of aircraft, may not exceed the approved maximum hours.
- 8. Item 11: Report any substitution, flight test, or variance from the student's approved course, or any change in enrollment and training status. Examples of such changes are the student substitutes an aircraft not approved for the course or the student's conduct or progress was unsatisfactory.

CAUTION: Willful submission of false information may result in fine or imprisonment or both.

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 or Title 38, Code of Federal Regulations 1.576 for routine uses identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education and Veteran Readiness and Employment Records - VA, published in the Federal Register. An example of a routine use allows VA to send educational forms or letters with a veteran's identifying information to the veteran's school or training establishment to(1) assist the veteran 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 veteran's education claim or to monitor his or her progress during training. Your obligation to respond is required to obtain or retain benefits. 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 determine the amount of flight benefits payable. Title 38, United States Code, section 3680(g). Title 38, United States Code, allows us to ask for this information. We estimate that the public will need 30 minutes to review the instructions, find the information, and complete this form. Our estimated average completion time is based on the respondent needing 30 minutes and the flight school's certifying official needing 15 minutes for a total completion time of 30 minutes. 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 22-6553c, XXX XXXX Page 2