

VA-ONCE Student Adopt Maintenance - Windows Internet Explorer

VA-ONCE

VAonce04
2-2-2222-22

Select

Admin

Reports

Logout

Add a Student

Enter the following information for the student

CLAIMANT

Last Name*

DEMO IHL (2-2-2222-22)

Facility Code*

454-56-4567

SSN*

☐ Student Has No SSN

OK

Cancel

Tasks

Margin

Help

Trusted sites

100%

VA-ONCE Student Bio - Windows Internet Explorer

Save Cancel Print ◀ Student ▶

VA-ONCE
VAonce04
2-2-2222-22

Bio Data

Name: CLAIMANT,
SSN: 454-56-4567
File/Payee: 00 000 000/

Program:
Chapter:
Training Type:

1

Bio Certs VA Data Log History

Select
Admin
Reports
Logout

Salutation First Name* Middle Name Last Name* Suffix
[] JOHN [C] CLAIMANT []

SSN* Student ID
454-56-4567 1234567

File Number* Payee# Chapter*
454-56-4567 00 33

Training Type*
IHL_UNDERGRAD

School Short Name Facility Code
DEMO IHL 2-2-2222-22

Program*
Bach Of Science Business Management

Prior Training Credit* PT Evaluated
[NA] []

☐ Guest Student ☐ Active Duty

Primary School -- Name -- State
[] []

Address* Location Domestic
123 MAIN ST

City* State*
ANYTOWN NH

Zip* Zip Suffix
12345 - []

Phone Extension
(111)555-5555 []

Email
na@va.gov

Alternate Email
[]

Notes
[]

Branch Svc DD-214 Parking Fry Recip ☐

Tasks Margin Help

Done Trusted sites 100%

VA-ONCE Certs - Windows Internet Explorer

Cert Complete Submit Print ◀ Student ▶



VAonce04
2-2-2222-22

Certs

Name: CLAIMANT, JOHN C Program: BS-BMGT
 SSN: 454-56-4567 Chapter: 33
 File/Payee: 454-56-4567/00 Training Type: Undergraduate

2



Bio

Select

Admin

Reports

Logout

Certs **VA Data** **Log** **History**

All
All
All
to

Filter

Term Name	Status	Facility Code	Begin Date Range	End Date Range
2				

Edit Enrollment Save Cancel

Facility: 22222222 Trng Type: IHL_UNDERGRAD Prgrm: BS-BMGT Prior Credit: **2**

FALL 2012	08/27/2012	12/21/2012	12	0			2400.00
Term Name	Begin Date*	End Date*	Res	Dist*	R/D	Clock	T & F*

☐ Advance Pay
 ☐ Accelerated Pay (high-tech courses only)

LDA/EFF Date

Remarks Modify Remarks List

Tasks
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Help

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