



Southeastern Baptist Theological Seminary

Military Rate Request Form

Personal Information:

Name: _____
Last First Middle

Social Security (Last 4 Numbers): _____ Student ID: _____

Phone: _____ E-mail: _____

Branch of Service

_____ Army _____ Navy _____ Air Force _____ Reserves/National Guard

Documentation You Plan to Provide

_____ DD-214

_____ Discharge Certificate

_____ Military Order

_____ Retirement Certificate

_____ Military End of Month LES

*You must submit one of these forms of verification before the military tuition rate will be applied to your account

Duty Status

_____ Active Duty _____ Veteran

Military Benefits You Receive (If any):

_____ Chapter 33 Post 9/11 GI BILL

_____ Chapter 30 Montgomery Bill: Current/Former Active Duty

_____ Chapter 1606 Montgomery Bill: Selected Reserve

_____ Chapter 1607 Montgomery Bill: Reserve Educational Assistance Program (REAP)

_____ Chapter 31 Vocational Rehabilitation

_____ Tuition Assistance (From of TA: Go Army etc) _____

_____ Other (please describe): _____

_____ None

Signature: _____

Date: _____