

ILLINOIS VETERAN GRANT (IVG) PROGRAM APPLICATION

WARNING: Any person who knowingly makes a false statement or misrepresentation on this application shall be subject to prosecution to the fullest extent of the law. Data may be verified with appropriate authorities of federal and state agencies.
Please note that your Social Security number (SSN) is needed for identification, verification and processing purposes in furtherance of your request for financial aid.

Please print legibly in ink or type. Before completing this application, read all pages and gather all required documentation. Allow at least four weeks for processing of this application.

First Name	M.I.	Last Name	Prior Last Name	Date of Birth
Social Security Number			Telephone Number	
Permanent Address	City	State	ZIP Code	Illinois County
E-mail Address				

Applicant's Federal Active Duty Service Information
(see "Eligibility Requirements" on page 3 for information regarding qualifying active duty service)
Refer to your Department of Defense (DOD) Certificate of Release or Discharge from Active Duty (DD Form 214 Member-4 or equivalent copy) to complete this section.

A DD Form 214 Member-4 for each period of federal active duty service must accompany the completed application. Please note: A DD Form 214 Member-1 or Worksheet is not equivalent to the DD Form 214 Member-4. If the most recent DD Form 214 Member-4 lists prior federal active duty service, a DD Form 214 Member-4 or equivalent (see Application Procedures on page 4) must be submitted for each period of such service.

Are you currently serving on federal active duty as a member of the Armed Forces of the United States?
 Yes No

If yes, most recent dates of federal active duty service (MM/DD/YYYY) From: ___/___/___ To: **Present**

If yes, does your Commanding Officer Letter (on departmental letterhead) contain the following:

- Member of Armed Forces Yes No Character of Service Yes No
Home of record Yes No
Length of Federal Active Duty Service and Expiration Date Yes No
Your Commanding Officer's title and a statement that he/she is your Commanding Officer Yes No

If no, most recent dates of federal active duty service (MM/DD/YYYY)

If you answered "No" above you must submit a DD Form 214 Member-4 or equivalent DOD documentation for your most recent period of federal active duty service.

From: ___/___/___ To: ___/___/___

Total Prior Active Duty Service

(as shown in line 12d of most DD Form 214 Member-4s):

_____/_____/_____
Year(s) Month(s) Day(s)

Breaks in service: If you had breaks in service you must list each period of federal active duty service and submit a DD Form 214 Member-4 or equivalent Department of Defense (DOD) documentation for each period of federal active duty service. Attach a separate piece of paper if additional space is needed.

From: ___/___/___ To: ___/___/___ From: ___/___/___ To: ___/___/___

Total Prior Active Duty Service:

_____/_____/_____
Year(s) Month(s) Day(s)

Total Prior Active Duty Service:

_____/_____/_____
Year(s) Month(s) Day(s)

At least 1 year Federal Active Duty Service

Have you served at least one year of federal active duty service? Yes No

Answer the following only if you served less than one year of federal active duty service:

a. Were you separated for medical reasons directly connected with your service? Yes No

You must submit a U.S. Armed Forces Medical Review Board Statement [Physical Evaluation Board (PEB) Proceedings, DA Form 199] stating discharge was due to a medical reason directly connected to your federal active duty service.

b. Were you separated prior to August 11, 1967? Yes No

c. Did you serve in a foreign country in a time of hostilities in that country? Yes No

This must be indicated on DD Form 214 Member-4 or equivalent DOD documentation.

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Applicant's Residency Information

Illinois Residency Before Federal Active Duty Service

Does your DD Form 214 Member-4 show your Home of Record as Illinois? Yes No

Were you a resident of Illinois at the time of entering federal active duty service or within 6 months prior to entering the service, or a student at an Illinois public university or community college at the time of entering federal active duty service? Yes No

If you answered "Yes" and your DD Form 214 Member-4 does not report your Home of Record or Place of Entry as Illinois, you must provide proof of Illinois residency within 6 months before active duty service.

Illinois Residency After Federal Active Duty Service

Do you plan to establish Illinois residency within six months after leaving your current federal active duty service in the Armed Forces of the United States? Yes No

Does your DD Form 214 Member-4 show your Mailing Address After Separation as Illinois? Yes No

Did you establish or re-establish Illinois residency within six months after leaving federal active duty service (or, if married to a person in continued military service, did you establish or re-establish Illinois residency within six months of your spouse's separation from the service, if your spouse was stationed outside of Illinois)? Yes No

If you answered "Yes" and your DD Form 214 Member-4 does not report your Mailing Address After Separation as Illinois, you must provide proof of establishing Illinois residency within 6 months after separation. If you are married to a person in continued military service, you must supply proof that you established Illinois residency within 6 months of the spouse's separation from the service (if the spouse was stationed outside Illinois). You must also submit a copy of the marriage certificate and your spouse's orders spanning the period of time required to meet Illinois residency criteria. If spouse has been discharged, a copy of his/her DD Form 214 Member-4 is required to show Mailing Address After Separation.

Are you a current Illinois resident? Yes No

Were you a resident of Illinois for at least 15 consecutive years at some point after leaving federal active duty service? Yes No

From: ___ / ___ / ___ To: ___ / ___ / ___

If you answered "Yes," you must provide proof of Illinois residency for at least 15 consecutive years.

Applicant Signature

Last Name	First Name	M.I.	Social Security Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Sign and date this certification section:

I certify, under the penalties of perjury as provided by law, that all information that I am submitting on this application and the required documentation is true and correct, and that I meet the eligibility requirements itemized within the Program Eligibility Requirements section of this application. I certify that I do not owe a refund on a federal or state grant. I certify that I am not in default on any federal student loan or, if in default, I understand that I must establish satisfactory repayment arrangements. I certify that I am in compliance with federal Selective Service registration requirements. I read all sections of this application before submitting it. Further, I give my consent to the federal and state departments of Veterans' Affairs, the Armed Forces of the United States, National Guard, Reserves, federal Selective Service and the institution I attend to release information to ISAC concerning my eligibility for the Illinois Veteran Grant (IVG) Program.

Applicant's Signature

Date

ILLINOIS VETERAN GRANT (IVG) PROGRAM APPLICATION

ELIGIBILITY REQUIREMENTS

1. Applicants must have served federal active duty in the Armed Forces of the United States. The term "Armed Forces of the United States" shall be defined as the United States Army, Air Force, Navy, Marines and Coast Guard.

If the applicant applies while serving in the Armed Forces of the United States and is designated as a qualified applicant, he/she must reapply upon separation.

Members of the Reserve Officer Training Corps (ROTC) are not eligible. Applicants are not eligible if their only service has been attendance at a service academy. Time served attending military schools or for Initial Active Duty for Training, in the Delayed Entry Program, National Guard, Reserve or any other time that was not federal active duty service is not considered equal to federal active duty service. Drill time (weekend and summer drills) by Guard members and Reservists is not equivalent to federal active duty service.

2. Required federal active duty service criteria

- a. Each period of service must be characterized as honorable.
- b. Have at least one year of federal active duty in the Armed Forces of the United States, unless he/she:
 - Was medically discharged and the medical reason for discharge was service related, or
 - Was discharged prior to August 11, 1967, or
 - Served in a foreign country in a time of hostilities in that country.

3. Required Illinois residency criteria

- a. Must have been a resident physically residing in Illinois within six months prior to entering the Armed Forces of the United States or was a student at an Illinois public university or community college at the time of entering active duty service; and
- b. Must have physically returned to Illinois and established or re-established residency within six months of leaving such service unless he/she is married and resided with a spouse who is/was serving in continued military service outside of Illinois. The applicant must submit a copy of the spouse's orders spanning the period of time required to meet Illinois residency criteria. (If spouse has been discharged, a copy of his/her DD Form 214 Member-4 may be required to show mailing address after separation.)

Proof of Illinois residency is required if the veteran's home of record on the DD Form 214 Member-4 or equivalent DOD documentation prior to entry is other than Illinois, or if the veteran's mailing address upon separation is other than Illinois. Documents must have been issued/dated within the relevant six months prior to the date entered into service and/or within six months after the date of separation (or spouse's separation if applicable).

Examples of acceptable documents are listed below.

OR if an applicant does not meet the requirements in **a** and **b** above, he/she may be eligible by meeting the requirements in **c**.

- c. Must reside in Illinois at the time of application and while enrolled and, at some point after leaving federal active duty service, was a resident of Illinois for at least 15 consecutive years.

Proof of Illinois residency for at least 15 consecutive years after leaving federal active duty service is required if applying under the eligibility criteria in c above.

Examples of acceptable documents are listed below.

4. Acceptable documents for proof of Illinois residency

- Illinois Driver's License
- Illinois Identification Card
- Wage and tax statements (IRS Form W-2)
- State of Illinois tax return or federal tax transcript
- Illinois Department of Employment Security Statement of Benefits
- Utility or rent bills (in the applicant's name)
- Illinois high school or college transcript
- Illinois voter's registration card
- IRS Form 1099 – Miscellaneous Income Statements
- Property tax bill
- Letter of employment printed on company letterhead that reflects applicant's Illinois address while employed, dates of employment, and is verified by certification in accordance with Illinois law (see 735 ILCS 5/1-109)
- Statement of benefits history from the Illinois Department of Healthcare and Family Services
- Illinois auto registration card
- Residential lease in the applicant's name
- Statement of benefits from the Social Security Administration

5. Receiving IVG benefits

Applicants may be considered eligible for the IVG Program if the Illinois residency criteria above are met, however, if he/she does not reside in Illinois while enrolled, he/she will not receive IVG benefits (unless residing with a spouse in continued military service who is currently stationed outside Illinois).

6. The applicant must not owe a refund on a federal or state grant and must meet or otherwise be exempt from federal Selective Service registration requirements.

A qualified applicant in default on any federal student loan shall be permitted one term of assistance, during which a satisfactory payment record must be established. If such a repayment record is not established, additional assistance shall be denied until a satisfactory repayment record is established. To establish repayment arrangements on a defaulted loan guaranteed by the Illinois Student Assistance Commission (ISAC), call 800.934.3572.

BENEFITS AND ELIGIBLE COLLEGES

This program pays eligible tuition and mandatory fees at any Illinois public college or community college. Qualified applicants may use this grant at the undergraduate or graduate level for the equivalent of four academic years of full-time enrollment. The college's financial aid office can provide information about what portion of the total tuition and fees will be covered by this grant.

APPLICATION PROCEDURES (prior versions of this application will only be accepted if all pertinent information is provided)

Please note: If the DD Form 214 Member-4 lists prior federal active duty service, a DD Form 214 Member-4 or equivalent must be submitted for each period of prior federal active duty service. Additionally, an applicant currently serving on federal active duty must provide proof of continuing federal active duty service when his/her current enlistment expires and reapply after discharge from federal active duty service. Any needed corrections to the DD Form 214 Member-4 must be completed before submitting the application.

Applicants must complete this application and supply the required documents including all necessary DD Form 214 Member-4s. Applicants should keep a copy of the completed application and documents. Allow at least four weeks for processing of the application. Incomplete applications and/or missing documentation will delay an eligibility decision.

ISAC will send qualified applicants a "Notice of Eligibility." It is important to keep a copy of the notice in order to present a copy to the college as needed. Qualified applicants must notify their college's financial aid office of their eligibility status as soon as possible, but not later than the last scheduled day of classes for the term for which a grant is requested.

TO OBTAIN AN EQUIVALENT COPY OF YOUR DEPARTMENT OF DEFENSE DD FORM 214 MEMBER-4

Write to the Illinois Department of Veterans' Affairs, P.O. Box 19432, Springfield, Illinois 62794-9432 or phone 217.782.4652; or write to the National Personnel Records Center, Military Personnel Records, 1 Archives Dr., St. Louis, Missouri 63128 (website: vetrecs.archives.gov). Reserve and National Guard members may also contact their unit's chain of command for assistance regarding additional equivalent documentation, such as a Reserve Retirement Points Statement or NGB Form 22 and 23.

FOR ASSISTANCE

If you have questions, or to learn more about the financial aid process and available programs, visit us at isac.org, call an ISAC Call Center Representative at 800.899.ISAC (4722), or send an e-mail message to isac.studentservices@illinois.gov.

MAIL PAGES 1 AND 2 ONLY TO:

ISAC, Dept. D, 1755 LAKE COOK ROAD, DEERFIELD, IL 60015-5209