

Update to the Survey Required by Public Act 96-0133 Under the Illinois Higher Education Veterans Services Act

Effective: _____

Institutional Information

University or Community College: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Telephone: _____

Website: _____

Website URL for Veterans and Military Services: _____

Student Population: _____

Veteran Population (student no longer serving in the military): _____

Military Personnel Population (active duty and reservists): _____

Dependent Population: _____

VA Work Study Positions: Yes: _____ No: _____

ROTC Programs: Yes: _____ No: _____

Branches: _____

Military/Veterans Club or Organization: Yes: _____ No: _____

Name of Military/Veterans Club or Organization: _____

Name of POC for Military/Veterans/Club or Organization: _____

Email of POC for Military/Veterans/Club or Organization: _____

Offer Priority Registration to:

Veterans: Yes: _____ No: _____

Military Personnel: Yes: _____ No: _____

Dependents: Yes: _____ No: _____

Monthly Rates of Pay or Housing Allowance for Full-Time In-Resident Students:

Chapter 30: _____ Chapter 33: _____ Chapter 35: _____ Chapter 1606: _____

Military/Veteran/Dependent Specific Scholarships: Yes: _____ No: _____

If Yes, Please Describe:

Points of Contact

Administration

President: _____

Director of Financial Aid: _____

Telephone: _____

Email: _____

Registrar: _____

Telephone: _____

Email: _____

Veteran Coordinator

Name: _____

Title: _____

Department: _____

Address: _____

Phone Number: _____

Email Address: _____

Supervisor: _____

Phone Number: _____

Email Address: _____

Primary Veteran School Certifying Official

Name: _____

Title: _____

Department: _____

Address: _____

Phone Number: _____

Email Address: _____

Supervisor: _____

Phone Number: _____

Email Address: _____

DOD Tuition Assistance POC

Name: _____

Title: _____

Department: _____

Address: _____

Phone Number: _____

Email Address: _____

Supervisor: _____

Phone Number: _____

Email Address: _____

Illinois Veterans Grant/Illinois National Guard Grant POC

Name: _____
Title: _____
Department: _____
Address: _____
Phone Number: _____
Email Address: _____
Supervisor: _____
Phone Number: _____
Email Address: _____

MIA/POW Scholarship POC

Name: _____
Title: _____
Department: _____
Address: _____
Phone Number: _____
Email Address: _____
Supervisor: _____
Phone Number: _____
Email Address: _____

Student Services

Please indicate which of the following provide programs or services designed for veterans or military personnel and their families:

- _____ Academic Advising Office
- _____ Academic Support/Tutoring
- _____ Admissions Office
- _____ Campus Social Events
- _____ Career Services
- _____ Counseling Center
- _____ Bursar Office
- _____ Disability Service Office
- _____ Employment Assistance
- _____ Financial Aid Office
- _____ Health Services
- _____ Mentoring
- _____ Orientation
- _____ Student Center
- _____ Transition Assistance
- _____ Tuition Assistance Counseling
- _____ Veterans Center
- _____ Other (please specify)

As needed, please provide below detail concerning programs and services available to veterans, military personnel and families.

Please indicate which of the following communication methods are used to inform currently enrolled veterans, military personnel and their families about programs and services available to them:

- Advisor
- College Catalog
- Email
- Mailing
- Print Advertisements
- Online
- Other (please describe)

Please describe how your institution tracks retention and goal completion of veterans and military personnel:

Please indicate which accommodations are made for students called to active duty during a term, semester or quarter.

- Tuition and fee refund policy
- Leave of absence policy
- Distance education options to complete coursework
- Other (please describe)

Please indicate which accommodations are made for families of military personnel called to active duty during a term, semester or quarter.

- Tuition and fee refund policy
- Leave of absence policy
- Online options for continuing in the same semester
- Other (please describe)

When called to active duty during the semester, would the semester count as a withdrawal?

- Yes
- No

Comments:

Does your institution accept military credit?

- Yes
- No

Does your institution use the ACE Guide to the Evaluation of Educational Experiences in the Armed Services in making determination for accepting credit?

- Yes
- No

Does your institution accept Defense Activity for Non-Traditional Education Support (DANTES):

- Yes
- No