



Welcome  
to

Sam Houston State University

# Admission Process for Bachelor Degree Programs

## Step 1 Apply to University

- Apply online at [ApplyTexas.org](https://ApplyTexas.org)
- Once on the site proceed through the prompt shown on the next page to complete your application
- Note: There is a Non-refundable \$45 application Fee you must pay in order to submit

Continue to next page



# Step 1

## Explore. Apply. Repeat.

### Research your options.

Admission information for every Texas public university and two-year school, plus many private colleges and universities.

[Begin your search »](#)

### Apply online.

Complete and submit your admission and scholarship applications online.

[Get started now »](#)

[Preview the 2020-2021 applications »](#)

[Preview the 2019-2020 applications »](#)

[View the 2020-2021 essay prompts »](#)

### Do it again.

No need to start from scratch. Copy a completed application and use it to apply to another school.

[Learn how »](#)

Essay prompts for U.S. Freshman and International Freshman applications for enrollment in Summer 2020, Fall 2020, and Spring 2021 have changed. You may preview the [new essay prompts here](#).

First time here? No problem.

[Get started »](#)

It's fast. It's easy.  
It's free.

[Create your account now »](#)

Already have an account?

[Log in now](#)

username

password

[Problems logging in? Click here](#)

[Log in](#)

# Admission Process for Bachelor Degree Programs

## Step 2 Submit School Transcripts

- Submit transcripts from previously attended High School, 2yr College, and 4yr University
- University Code: 003606 (If submitting electronically)
- Sam Houston State University does not accept emailed or faxed transcripts

# Admission Process for Bachelor Degree Programs

## Step 3 Hazlewood Application

- Download and print the Hazlewood Application
- Fill out the forms completely according to your status
- Failure to submit complete forms will result in a delay in processing your account

Continue to next page

# Step 3



## Texas Hazlewood Act Exemption Application Supporting Documentation Instructions

TVC-ED-1a  
Eff. June 2016  
Page 1 of 1

This page provides links to help complete this form and information on the Hazlewood program

Continue to next page

To apply for the Texas Hazlewood Act Exemption, you must **submit the following documents to your college or university:**

1. **The Hazlewood Exemption Application** (completed and signed). For a [tutorial](http://www.tvc.texas.gov/Hazlewood-Act.aspx) on completing the application, visit: <http://www.tvc.texas.gov/Hazlewood-Act.aspx>.

2. **Report of Separation or Discharge, DD Form 214 (and DD Form 215 if the DD Form 214 has been amended)** – To verify the Veteran's place of entry, home of record at the time of entry, character of service, length of service, and dates of service. The copy you provide to your institution must be legible and contain the information listed above.

A DD Form 214 may be obtained from the National Archives:  
<http://www.archives.gov/veterans/military-service-records/>.

If the Veteran was discharged prior to January 1, 1950 previously used separation documents may be used. If the Veteran's DD Form 214 was destroyed in the National Archives fire in 1973 or is otherwise unavailable, then the following documents may be used:

- NA Form 13038, Certification of Military Service
- Documentation from the National Archives that the Veteran's NA Form 13038 was sent in lieu of the DD Form 214 due to the DD Form 214 not being on file
- Documentation that Veteran met the requirements of Subchapter B, Chapter 54, Texas Education Code for resident tuition on the date of entry into active duty indicated on the DD Form 214

3. **Certificate of Eligibility for federal GI Bill benefits** – To verify eligibility for the Veteran's, or dependent's federal education benefits. Certificates of eligibility may be obtained by completing an application on the Veterans Online Application (VONAPP) website at <https://www.ebenefits.va.gov/ebenefits/vonapp>.

- If the Veteran's final discharge is prior to 9/11/2001 the certificate of eligibility is not required.

4. **If the Veteran died while in service: Report of Casualty, Form DD Form 1300** – To verify the Veteran's place of entry or home of record, and that his/her death was service related.

5. **If the Veteran is deceased (not service connected)** – Death Certificate for deceased Veteran for use in a Legacy transfer.

6. **If the Veteran is totally disabled or individually unemployable due to military service-related illness or injury:** You must have a current (within one year) disability ratings decision letter from the VA indicating that rating.

7. If you are not the Veteran, **Relationship Documentation** – Submit one or more of the following documents to verify your relationship to the eligible Veteran.

- Birth Certificate, or Marriage Certificate, or Adoption Papers, or Recent IRS Tax Transcript:  
<https://www.irs.gov/individuals/get-transcript>.

8. Veterans must reside in the state of Texas during the term that the exemption will be used.

- Children and spouse of eligible Veterans must be classified as a Texas resident by their institution.

9. **Hazlewood Online Database Registration** – To comply with the Federal Educational Rights and Privacy Act (FERPA) requirements, all applicants (Veteran and dependents) must register into the Hazlewood online database to use the Hazlewood Exemption at <https://hazlewood.tvc.texas.gov/students/>.

TEXAS VETERANS COMMISSION

Phone: 1-877-898-3833 or 512/463-3168 | TTY/TDD: Dial 711 | Fax: 512/463-3932 | E-Mail: [Education@tvc.texas.gov](mailto:Education@tvc.texas.gov) | Web: [www.tvc.texas.gov](http://www.tvc.texas.gov)  
An Equal Opportunity Employer

# Step 3



## Texas Hazlewood Act Exemption Application

TVC-ED-1  
Eff. June 2016  
Page 1 of 2

All sections, all boxes,  
all blanks on this page  
must be fully filled out

Continue to next page

For (Term) \_\_\_\_\_ (Year) \_\_\_\_\_ at (Institution) \_\_\_\_\_

**\*Submit this application to your college or university, not to the Texas Veterans Commission\***

Each Veteran, child, or spouse applying to receive an exemption through the Hazlewood Act, (Texas Education Code §54.341) must complete and sign this application and provide the institution with the documentation required to verify eligibility as indicated in this packet. Submit this application and all supporting documentation to your institution's Hazlewood Act Exemption administrator.

I am applying as (check only one):

- ☐ a Veteran intending to use the Hazlewood Exemption (Complete Parts A, C, & D)  
☐ a child intending to receive a Legacy transfer of benefits (Complete Parts A-E)  
☐ a child of a totally disabled, service-related deceased, KIA, or MIA Veteran (Complete Parts A-D)  
☐ a spouse of a totally disabled, service-related deceased, KIA, or MIA Veteran (Complete Parts A-D)

I am (check only one):

- ☐ an applicant applying for the first time; or  
☐ a previous Hazlewood recipient who has used \_\_\_\_\_ hours at \_\_\_\_\_ institution(s).

Total prior hours used: Veteran \_\_\_\_\_, Legacy (transferred hrs.) \_\_\_\_\_, Spouse \_\_\_\_\_, Child (w/own hrs.) \_\_\_\_\_

### Part A – Veteran's Information

Veteran's Name: \_\_\_\_\_  
Last Name First Name MI  
Veteran's SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YYYY)  
Veteran's Student ID# (if applicable): \_\_\_\_\_  
Address: \_\_\_\_\_  
Street City State Zip Code  
Phone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

### Part B – Other User Information

Relationship to Veteran:  
☐ Biological Child ☐ Step-child ☐ Adopted Child ☐ IRS Dependent ☐ Spouse  
Child's/Spouse's Name: \_\_\_\_\_  
Last Name First Name MI  
Child's/Spouse's SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YYYY)  
Child's/Spouse's Student ID# : (if applicable) \_\_\_\_\_  
Permanent Address: \_\_\_\_\_  
Street City State Zip Code  
Phone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

### Part C – Loan Verification

To qualify for the Hazlewood Exemption, the Veteran, child or spouse cannot be in default on a loan that is made or guaranteed by the state of Texas. State loans can be viewed at <http://www.hhloans.com/>.

Does the Veteran, child or spouse have a loan through the Texas Higher Education Coordinating Board?

☐ Yes ☐ No

If yes, is the loan in default status?

☐ Yes ☐ No ☐ Not Applicable



# Step 3



## Texas Hazlewood Act Exemption Application

TVC-ED-1  
Eff. June 2016  
Page 2 of 2

All sections and all  
blanks must be fully  
filled out

Continue to next page

### Part D – Veteran, Child, and Spouse Certification and Consent

The Texas Hazlewood Act Exemption entitles eligible persons to an exemption of tuition and specified fees of up to 150 semester credit hours at public institutions of higher education in Texas. Except for recipients who are the spouse or children of eligible Veterans killed in action, missing in action, or whose death resulted from a service-related injury or illness; all other Hazlewood recipients meet the grade point average satisfactory academic progress requirements and other requirements of Texas Education Code §54.2001.

I grant permission to any institution I have enrolled in or intend to enroll in to release credit hour information pertaining to my enrollment to the Texas Veterans Commission and the Texas Higher Education Coordinating Board, and further grant permission to the Commission and Board to share such information with any institution that I might attend. I certify that the information I have provided is true and correct to the best of my knowledge. I further understand that if I have provided inaccurate, incomplete, or untrue information on this application, I may be required to reimburse the institution for tuition, fees, and penalties pertaining to the Hazlewood Exemption.

Veteran's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Veteran's signature is not required if the eligible Veteran is totally disabled, service-related deceased, MIA, or KIA.)

Child's/Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(If applicable.)

**\*Submit this application to your college or university, not to the Texas Veterans Commission\***

### Part E – Legacy Child Certification and Consent

The Texas Hazlewood Exemption allows eligible Veterans or a designee to transfer all unused hours of the exemption, up to 150 semester credit hours, to a child who is 25 years old or younger on the first day of the term. Legacy recipients will receive an exemption for the number of degree certified hours associated with the specific degree or certificate program he or she is enrolled in consistent with the program length as defined in the school catalog as approved by the regional accreditation commission. Legacy recipients must meet the grade point average satisfactory academic progress requirements and other requirements of Texas Education Code §54.2001. Assigned hours may be revoked by the Veteran or the designee.

I (Veteran) \_\_\_\_\_ waive the right to all of the unused portion of my Hazlewood Exemption and grant permission to transfer those unused Hazlewood hours under Texas Education Code §54.341(k) (Legacy Act) to my eligible child, (child) \_\_\_\_\_. I agree to release current term and historic credit hour information to the Texas Veterans Commission and the Texas Higher Education Coordinating Board to determine the balance of my unused hours. I grant permission for the Commission and Board to share such data with any institution that my eligible child might attend. I understand that only one eligible person may use my hours for a particular term. I hereby certify the information I have provided is true and correct. I understand that if I fail to provide accurate information, I may be required to reimburse the institution and penalties may be imposed.

Veteran's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\* If the qualifying Veteran is deceased, the Veteran's Designee (Print Name) \_\_\_\_\_  
may sign above in Veteran's place\*

Veteran's Child's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*Submit this application to your college or university, not to the Texas Veterans Commission\***



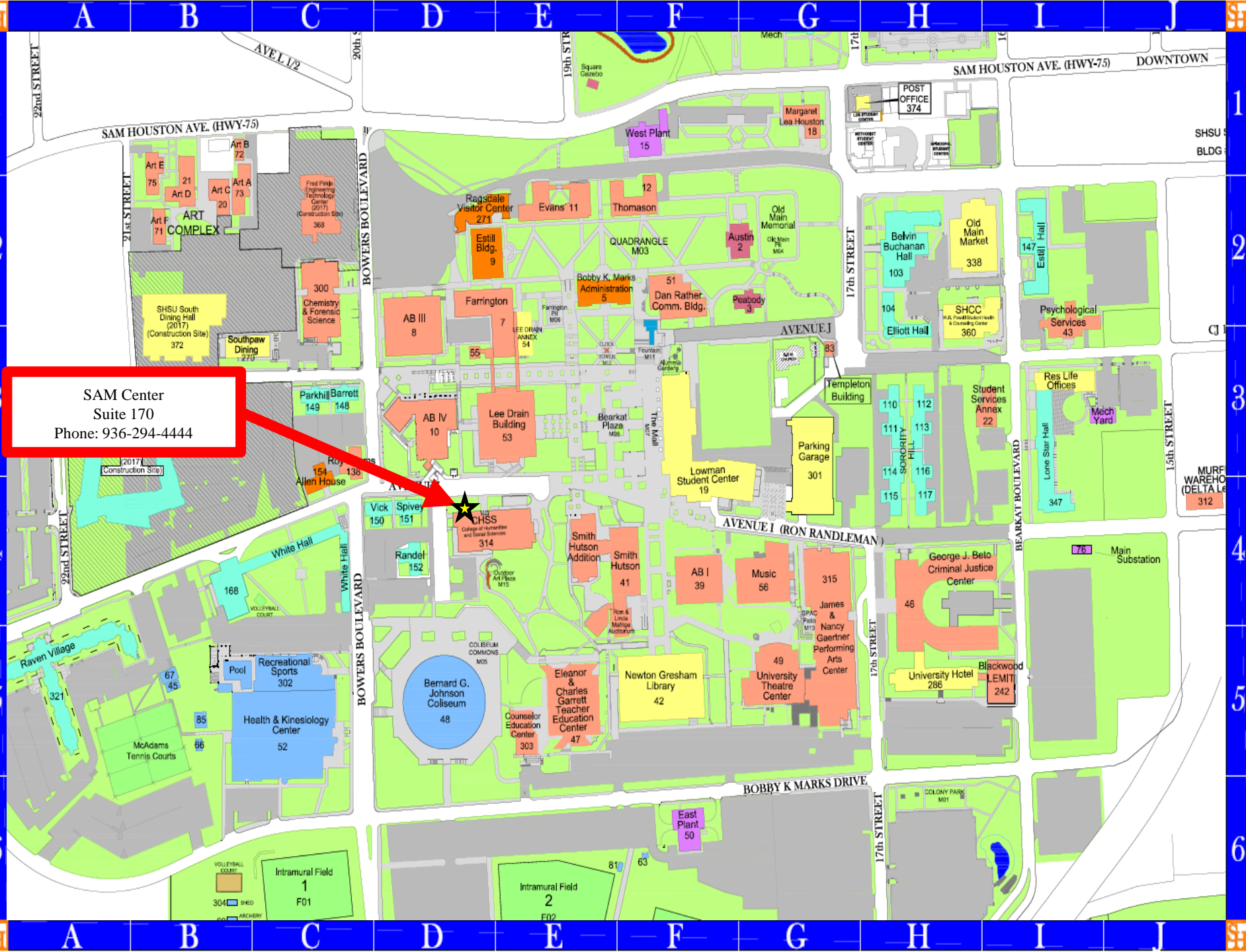
# Admission Process for Bachelor Degree Programs

## Step 4 Advisement & Registration

- Once accepted to Sam Houston State University schedule an appointment with a student advisor at the Sam Center to register for classes
- Location: College of Humanities and Social Sciences Building, Suite 170
- Phone: (936) 294-4444, Email: [samcenter@shsu.edu](mailto:samcenter@shsu.edu)

Continue to next page

SAM Center  
Suite 170  
Phone: 936-294-4444



# Admission Process for Bachelor Degree Programs

## Step 5 Paperwork Submission

- Once you have a class schedule contact the Veterans Resource Center to have the appropriate hyperlinks put onto your MySam Profile for paperwork submission  
(Phone Only | 936-294-1046)

# Admission Process for Bachelor Degree Programs

## Step 5 Paperwork Submission

- Documents for Hazlewood Spouse & Dependent users to gather for submission:
  - DD-214 (Member 4 copy or Service 2 copy)
  - SHSU Hazlewood request for term certification (Electronic form automatically generated on your MySam account)
  - Hazlewood Application (Can be obtained by clicking on the corresponding hyperlink on your MySam account)

Continue to next page



# Admission Process for Bachelor Degree Programs

## Step 5 Paperwork Submission

- Documents for Hazlewood Spouse & Dependent users to gather for submission:
  - Birth Certificate, or Marriage Certificate, or Adoption Documentation, or Official Tax Transcript from current or previous year (used to indicate dependency of child)
  - VA rating decision letter if the Veteran is Totally and Permanently disabled and or individual unemployable
  - Death Certificate for deceased Veteran (only if needed, DD Form 1300 or civilian form)

Continue to next page

# Admission Process for Bachelor Degree Programs

## Step 5 Paperwork Submission

- Upload and submit all documents during the same session to your MySam account for review by your School Certifying Official at the Veterans Resource Center.

Continue to next page

# Admission Process for Bachelor Degree Programs

## Step 5 Paperwork Submission

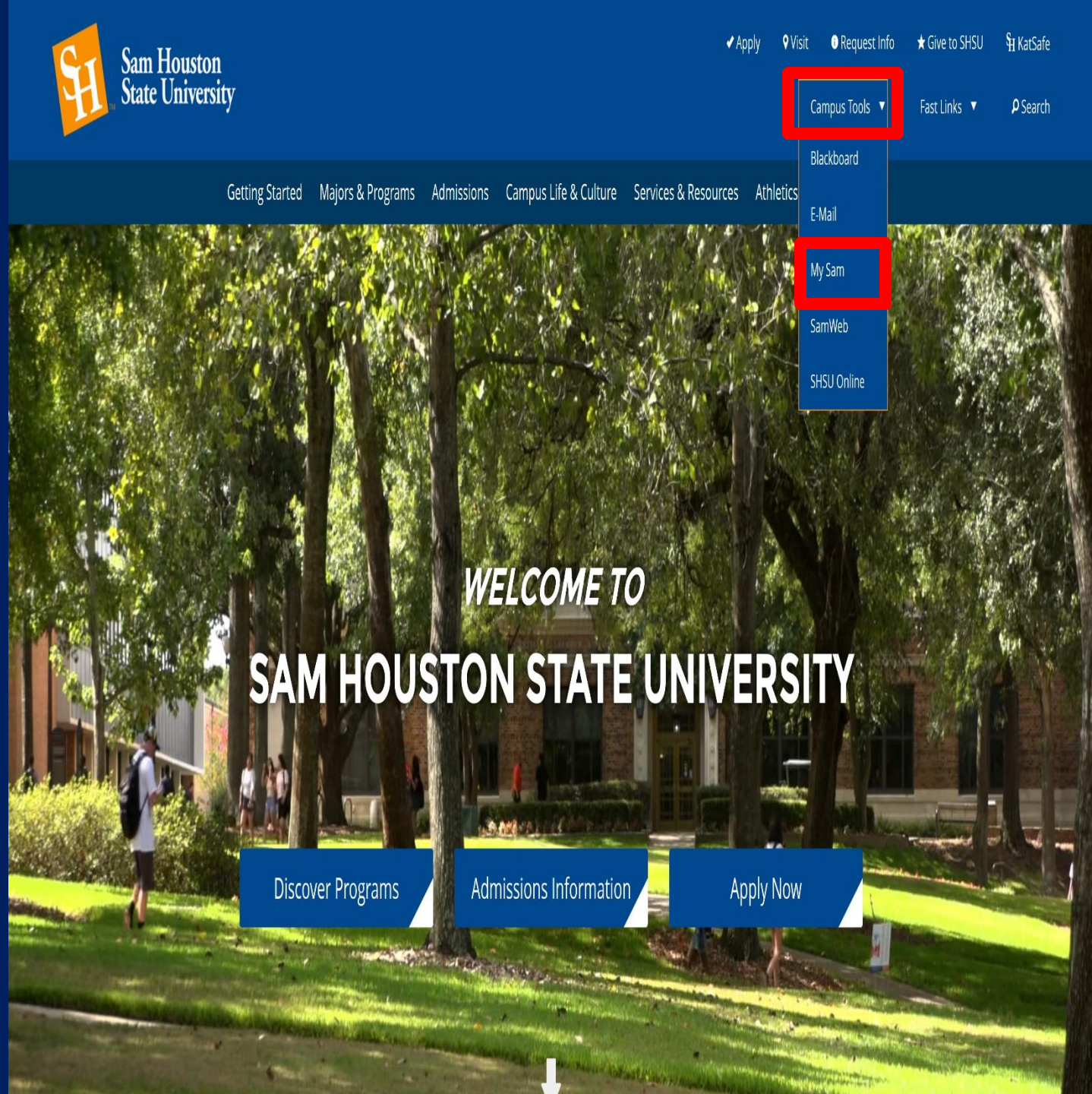
- Follow these five steps to upload documents:
  - Log into your MySam account
  - Click on your My Account tab
  - Go to the bottom right of the page and click on the Financial Aid Requirements link
  - Select the proper academic year.
  - Click on each link to upload your documents.

Continue to next page

## Step 5

On the SHSU home page click on “Campus Tools” and then click “My Sam” to access your account

Continue to next page





# Step 5

All Users

Campus Resources

**My Account**

Registration

Employees

Faculty

Students

Welcome to the new MySam portal! How can we improve this for you? [Share Your Feedback](#)

## Registrar Announcements

- Please see the [Academic Calendar](#) to view important dates for Spring 2018

## Banner - Administrative Applications

Formerly known as Internet Native Banner (INB).

[Banner Administrative Applications](#)

[Document Management \(BDM\)](#)

Access to Banner Administrative Applications and Document Management (BDM) is limited to on campus only. Internet Explorer is required.

[Banner Employee Profile](#)

Access Leave Reports, Time Sheets, EPAFs, and more!

## Newton Gresham Library

[Borrow or Renew Books](#)

[Interlibrary Loan](#)

[Distance Learning Services](#)

[Undergraduate Student Services](#)

[Graduate Student Services](#)

[Faculty Services](#)

[More Services...](#)

[Databases](#)

[Find More on the Library Website](#)

Chat is ON! Ask a librarian.

## SHSU Online Newsletter

## Faculty Self Service Links

- Faculty Dashboard
- Summary Class List (Roster)
- Detail Class List
- Faculty Detail Schedule
- Week at a Glance
- Final Grades
- Attendance Tracking
- Ellucian CRM Recruit
- Access to DegreeWorks

## Campus Connect

Campus Connect provides the entire campus a coordinated care and communication network that helps manage student risk from identification to resolution – using data and analytics to optimize student support and to improve student outcomes. Departments, colleges, and divisions – academic

All Users

Campus Resources

**My Account**

Registration

Employees

Faculty

Students

## International Payment Procedure

## Office of the Registrar

### Primary functions:

- Registration
- Transcripts
  - Official
  - Unofficial
- Graduation
- [View Grades](#)

### Other Services:

- TSI
- Enrollment Verification

Please visit the Office of the Registrar for more information:

<http://www.shsu.edu/dept/registrar/>

- [Sign up for a payment plan](#)

## IMPORTANT PAYMENT PLAN INFORMATION

- Spring charges and payment plans are now available.
- [Sign up through your student account center](#)
- Basics of the Tuition and Fee Installment Plan
- A nonrefundable \$30 setup fee is charged for enrolling in a payment plan

## Upcoming Due Dates

## Payment Methods

## Make an International Payment

## Important Payment Information

## IRS Form 1098-T Information

Estill Building, Room 103. Hours: 8 AM – 5 PM  
Monday through Friday. Phone [936-294-1083](tel:936-294-1083). Fax  
[936-294-1229](tel:936-294-1229). Email [bursar@shsu.edu](mailto:bursar@shsu.edu)

## How to Pay Your Bill Online

When viewing your student account Summary in Banner Self-Service please note the difference between the **TERM** balance and the **ACCOUNT** balance. The account balance includes all terms for which you are registered, not just the current term.

How to Pay Online / Enroll in a Payment Plan for:

- [Students - PDF](#)
- [Authorized Users - PDF](#)

## Financial Aid Requirements

[Financial Aid Requirements](#)

## Financial Aid Awards

[Financial Aid Awards](#)

# Step 5

## Aid Year

Some financial aid information is determined by Aid Year (the academic year for which you are receiving financial aid).

Select Aid Year **Academic Year 2018-2019**

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## Eligibility Requirements for Academic Year 2017-2018

### Satisfied Requirements

Requirement	Status	As of Date	Fund Term
Fall VA Request Certification Form			
Free Application for Federal Student Aid			
Initial Information Letter			
Second bachelor aid request			
VA Spring Request Certification Form			

[Select Another Aid Year](#)

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Select your Aid year  
and then click submit

Click on each link and  
submit the  
corresponding forms

Note: submit all forms  
during the same  
session

Failure to do so will  
delay your process  
time

Continue to next page

# Step 5

## DD-214 Member 4 Copy

- Admin Data
- Record of Service
- Type of Separation
- Character of Service
- Member – 4

These areas must be legible

Continue to next page

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES THIS IS AN IMPORTANT RECORD. SAFEGUARD IT. ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

### CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle)		2. DEPARTMENT, COMPONENT AND BRANCH		3. SOCIAL SECURITY NUMBER																																	
4a. GRADE, RATE OR RANK	b. PAY GRADE	5. DATE OF BIRTH (YYYYMMDD)	6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD)																																		
7a. PLACE OF ENTRY INTO ACTIVE DUTY		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known)																																			
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND			b. STATION WHERE SEPARATED																																		
9. COMMAND TO WHICH TRANSFERRED				10. SGLI COVERAGE <input type="checkbox"/> NONE																																	
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.)				12. RECORD OF SERVICE																																	
				<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>YEAR(S)</th> <th>MONTH(S)</th> <th>DAY(S)</th> </tr> </thead> <tbody> <tr><td>a. DATE ENTERED AD THIS PERIOD</td><td></td><td></td><td></td></tr> <tr><td>b. SEPARATION DATE THIS PERIOD</td><td></td><td></td><td></td></tr> <tr><td>c. NET ACTIVE SERVICE THIS PERIOD</td><td></td><td></td><td></td></tr> <tr><td>d. TOTAL PRIOR ACTIVE SERVICE</td><td></td><td></td><td></td></tr> <tr><td>e. TOTAL PRIOR INACTIVE SERVICE</td><td></td><td></td><td></td></tr> <tr><td>f. FOREIGN SERVICE</td><td></td><td></td><td></td></tr> <tr><td>g. SEA SERVICE</td><td></td><td></td><td></td></tr> <tr><td>h. INITIAL ENTRY TRAINING</td><td></td><td></td><td></td></tr> </tbody> </table>			YEAR(S)	MONTH(S)	DAY(S)	a. DATE ENTERED AD THIS PERIOD				b. SEPARATION DATE THIS PERIOD				c. NET ACTIVE SERVICE THIS PERIOD				d. TOTAL PRIOR ACTIVE SERVICE				e. TOTAL PRIOR INACTIVE SERVICE				f. FOREIGN SERVICE				g. SEA SERVICE			
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g. SEA SERVICE																																					
h. INITIAL ENTRY TRAINING																																					
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)				14. MILITARY EDUCATION (Course No., number of weeks, and month and year completed)																																	
15a. COMMISSIONED THROUGH SERVICE ACADEMY				YES	NO																																
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 3107a)				YES	NO																																
c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 109) (If Yes, type of commitment)				YES	NO																																
16. DAYS ACCRUED LEAVE PAID	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION			YES	NO																																
18. REMARKS																																					
The information contained herein is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program.																																					
19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code)				b. NEAREST RELATIVE (Name and address - include ZIP Code)																																	
20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify date/locality)				OFFICE OF VETERANS AFFAIRS	YES NO																																
a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC)				YES	NO																																
21a. MEMBER SIGNATURE	b. DATE (YYYYMMDD)	22a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature)		b. DATE (YYYYMMDD)																																	
23. TYPE OF SEPARATION		24. CHARACTER OF SERVICE (Include upgrades)																																			
25. SEPARATION AUTHORITY		26. SEPARATION CODE		27. REENTRY CODE																																	
28. NARRATIVE REASON FOR SEPARATION																																					
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD)				30. MEMBER REQUESTS COPY 4 (Initials)																																	

DD FORM 214, AUG 2009 PREVIOUS EDITION IS OBSOLETE

MEMBER - 4

# Step 5

## DD-214 Service 2 Copy

- Admin Data
- Record of Service
- Type of Separation
- Character of Service
- Service – 2

These areas must be legible

Continue to next page



CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES THIS IS AN IMPORTANT RECORD. SAFEGUARD IT. ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY					
1. NAME (Last, First, Middle)		2. DEPARTMENT, COMPONENT AND BRANCH		3. SOCIAL SECURITY NUMBER	
4a. GRADE, RATE OR RANK	b. PAY GRADE	5. DATE OF BIRTH (YYYYMMDD)	6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD)		
7a. PLACE OF ENTRY INTO ACTIVE DUTY		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known)			
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND			b. STATION WHERE SEPARATED		
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.)					
12. RECORD OF SERVICE					
a. DATE ENTERED AD THIS PERIOD		YEAR(S)	MONTH(S)	DAY(S)	
b. SEPARATION DATE THIS PERIOD					
c. NET ACTIVE SERVICE THIS PERIOD					
d. TOTAL PRIOR ACTIVE SERVICE					
e. TOTAL PRIOR INACTIVE SERVICE					
f. FOREIGN SERVICE					
g. SEA SERVICE					
h. INITIAL ENTRY TRAINING					
i. EFFECTIVE DATE OF PAY GRADE					
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGNS RIBBONS AWARDED OR AUTHORIZED (All periods of service)					
15a. COMMISSIONED THROUGH SERVICE ACADEMY					
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107b)					
c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 105) (If Yes, specify program)					
16. DAYS ACCRUED LEAVE PAID		17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION		YES NO	
18. REMARKS					
The information contained herein is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program.					
19a. MAILING ADDRESS AFTER SEPARATION (include ZIP Code)			b. NEAREST RELATIVE (name and address - include ZIP Code)		
20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality)				OFFICE OF VETERANS AFFAIRS	
a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC)				YES NO	
21a. MEMBER SIGNATURE		b. DATE (YYYYMMDD)	22a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade (Etc. Signature)		b. DATE (YYYYMMDD)
23. TYPE OF SEPARATION		24. CHARACTER OF SERVICE (include upgrades)			
25. NARRATIVE REASON FOR SEPARATION					
26. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD)				30. MEMBER REQUESTS COPY 4 (Initial)	

DD FORM 214, AUG 2009 PREVIOUS EDITION IS OBSOLETE

SERVICE - 2



# Step 5

## Disabled Letter

- Admin Data
- SSN
- Totally and Permanently Disabled: Yes

These areas must be legible

Note: This is only an example document. General appearance and layout may vary

Continue to next page



Department of  
Veterans Affairs  
FED BLDG 915 2ND AVE  
SEATTLE WA 98174



January 23, 2015

Veteran's Name:

Mr. John Doe  
3405 Elinor Drive  
Mayberry, NC 43275

This letter is a summary of benefits you currently receive from the Department of Veterans Affairs (VA). We are providing this letter to disabled Veterans to use in applying for benefits such as housing entitlements, free or reduced state park annual memberships, state or local property or vehicle tax relief, civil service preference, or any other program or entitlement in which verification of VA benefits is required. Please safeguard this important document. This letter replaces VA Form 20-5455, and is considered an official record of your VA entitlement.

--America is Grateful to You for Your Service--

Our records contain the following information:

### Personal Claim Information:

Your VA claim number is: XXX-XX-0123  
You are the Veteran

### Military Information:

Your character(s) of discharge and service date(s) include:

Army, Honorable, 02-Apr-1998 - 12-Dec-2002

Army, Honorable, 13-Dec-2002 - 27-May-2013

(You may have additional periods of service not listed above)

### VA Benefits Information:

Service-connected disability: Yes

Your combined service-connected evaluation is: 100 PERCENT

The effective date of the last change to your current award was: 01-DEC-2014

Your current monthly award amount is: \$3,348.64

Are you considered to be totally and permanently disabled due to your service-connected disabilities: Yes

You should contact your state or local office of Veterans' affairs for information on any tax, license, or fee-related benefits for which you may be eligible. State offices of Veterans' affairs are available at <http://www.va.gov/statedva.htm>.

### Need Additional Information or Verification?

If you have any questions about this letter or need additional verification of VA benefits, please call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the federal relay number is 711. Send electronic inquiries through the Internet at <https://iris.va.gov>.

Sincerely yours,

T. MCARTOR  
VETERANS SERVICE CENTER MANAGER

# Step 5

## Report of Casualty DD-1300

- Admin data
- DD-1300

These areas must be legible

Note: This is only an example document. General appearance and layout may vary

Continue to next page

### SAMPLE REPORT OF CASUALTY (DD FORM 1300)

REPORT OF CASUALTY		REPORT CONTROL SYMBOL DD-P&R(AR)1664	
1. REPORT TYPE		2. DATE PREPARED	
3. SERVICE IDENTIFICATION			
a. NAME (Last, First, Middle and Suffix)		b. SOCIAL SECURITY NO.	c. RANK
d. PAY GRADE		e. OCCUPATIONAL CODE/ RATING	
f. COMPONENT	g. BRANCH	h. ORGANIZATION	
4. CASUALTY INFORMATION			
a. TYPE	b. STATUS	c. CATEGORY	d. DATE OF CASUALTY
e. PLACE OF CASUALTY			
f. CIRCUMSTANCES			
g. DUTY STATUS			h. BODY RECOVERED
5. BACKGROUND INFORMATION			
a. DATE OF BIRTH	b. PLACE OF BIRTH	c. COUNTRY OF CITIZENSHIP	
d. RACE			
e. ETHNICITY			f. SEX
g. RELIGIOUS PREFERENCE			
6. ACTIVE DUTY INFORMATION			
a. PLACE OF ENTRY	b. DATE OF ENTRY	c. HOME OF RECORD AT TIME OF ENTRY	
d. EMPLOYER'S ADDRESS			
FOOTNOTES: 1. Adult next of kin. 2. Beneficiary for gratuity pay in event there is no surviving spouse or child - as designated on record of emergency data. 3. Beneficiary for unpaid pay and allowances - as designated on record of emergency data.			
8. REPORTING INFORMATION			
a. COMMAND AGENCY			b. DATE RECEIVED
9. DISTRIBUTION		10. SIGNATURE ELEMENT	
DD FORM 1300, MAR 2004		NOTES: This form may be used to facilitate the marking of benefits, the payment of nonmedical insurance, and the settlement of any claim in which proof of death is required. PREVIOUS EDITION MAY BE USED.	

Reset

# Admission Process for Bachelor Degree Programs

## Step 5 Paperwork Submission

- Your paperwork will take about 4 - 6 weeks to fully process
- If there are any problems with your paperwork the Veterans Resource Center will contact you directly by phone or your SHSU email to resolve any problems
- Please check each submission link for status updates before contacting the Veterans Resource Center

Continue to next page

# Additional Hazlewood Information

- The Hazlewood Act is a State of Texas benefit that provides qualified Veterans, spouses, and dependent children with an education benefit of up to 150 hours of tuition exemption, including most fee charges, at public institutions of higher education in Texas. This does NOT include living expenses, books, or supply fees.
- Hazlewood covers about 90% of all fees here at Sam Houston State University. It does not cover service fees or athletic fees.
- Applications and all supporting documentation must be received by the institution no later than the last day of class in order to be evaluated for the semester or term.
- If a child to whom hours have been delegated fails to use all the assigned hours, a Veteran may re-assign the unused hours that are available to another child. Only one child will use Hazlewood Legacy Benefits at a time.

Continue to next page



# **Contact Us**

**Location: Academic Building 3, Suite 116**

**Email: [Veterans@shsu.edu](mailto:Veterans@shsu.edu)**

**Phone: 936-294-1046**

**Fax: 936-294-4921**

Veterans Resource Center  
Hours: 0800-1700  
Phone: 936-294-1046



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