

## Supplemental Enrollment Information

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
CSUID

\_\_\_\_\_  
VA Benefits Chapter

If Colorado State University is your primary institution (institution from which you will be receiving your degree), and you wish to receive benefits for supplemental enrollment at an institution other than Colorado State University, you must:

1. Verify with Transfer Evaluation that courses are transferable;
2. Complete the next section of this form giving courses and credits at your supplemental school and how they will transfer here;
3. Have your CSU advisor attest, by his/her signature and date, that the listed courses will be accepted and count towards your degree;

## Institution Enrollment Information

\_\_\_\_\_  
Name of Supplemental Attendance School

\_\_\_\_\_  
Email for Other School's SCO

Term or Semester: \_\_\_\_\_

Course Number (at supplemental attendance institution)	Title	Credits	Colorado State University (course equivalent)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

\_\_\_\_\_  
Advisor's Signature

\_\_\_\_\_  
Advisor's Department

\_\_\_\_\_  
Date

After completing this form, advisors please email back to [gi\\_bill@colostate.edu](mailto:gi_bill@colostate.edu). Upon receipt, Supplemental Institution will be sent a Parent School Letter directing them to certify the above courses to the VA.