

RECORD OF PREVIOUS EDUCATION AND TRAINING

Student Name (Printed) _____ GRCC ID# _____
Initial Semester of Enrollment _____

Postsecondary Education (Military, College, Technical etc)

Military Branch _____ Circle One: Active Duty/ Guard/ Reserve
Dates of Service - entered _____ discharged _____
Date Rec'd by GRCC _____

Name of School _____ Location _____
Dates Attended _____ Graduated (Yes/No) _____
Type of Diploma/Degree _____ Major _____
Date Rec'd by GRCC _____

Name of School _____ Location _____
Dates Attended _____ Graduated (Yes/No) _____
Type of Diploma/Degree _____ Major _____
Date Rec'd by GRCC _____

Name of School _____ Location _____
Dates Attended _____ Graduated (Yes/No) _____
Type of Diploma/Degree _____ Major _____
Date Rec'd by GRCC _____

Name of School _____ Location _____
Dates Attended _____ Graduated (Yes/No) _____
Type of Diploma/Degree _____ Major _____
Date Rec'd by GRCC _____

I certify that I have listed all prior training above and the information provided is correct. I agree to request official transcripts be sent to Grand Rapids Community College for all schools listed. If transcripts are not requested and received by my second semester I acknowledge that I will not be eligible for certification with the VA until they are received. I understand that Grand Rapids Community College will evaluate these transcripts and post eligible transfer credit to my record. I also understand that the VA will not pay for classes that are not needed for my program/degree at Grand Rapids Community College.

Signature

Date