UNLV VETERAN SERVICES
4505 Maryland Parkway Box 452003
Las Vegas, Nevada 89154-2003
Reynolds Student Services Complex, Bldg. A, Third Floor, Room 311
(702) 895-2290    FAX: (702) 895-1145

UNLV CONCURRENT SEMESTER ENROLLMENT FORM (IN LIEU OF FL-315)

THIS FORM IS USED FOR CLASSES YOU ARE TAKING AT ANOTHER INSTITUTION THAT WILL BE ACCEPTED TOWARD YOUR DEGREE AT UNLV.

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<tr>
<th>First Name</th>
<th>Last Name</th>
<th>MI</th>
<th>SS#</th>
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VA File # _______________  Chapter _______________  Active Duty? Yes No

Term Requested __________  Concurrent Institution _______________________

1. To be completed by you and your UNLV Academic Advisor.

<table>
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<tr>
<th>Subject</th>
<th>Course Number</th>
<th># of credits</th>
<th>Course Name</th>
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2. To be signed by student.

I understand that I am required to have transcripts sent to the parent institution (UNLV) at the end of each semester. Failure to do so may result in an overpayment by the Veteran Administration for which I will be responsible to repay. **Students are responsible for completing certification process through the certifying official at the concurrent institution.**

Student Signature ___________________________ Date ____________

3. To be signed by your UNLV Academic Advisor, Chair or Dean

I have approved this coursework for the student’s degree program and the courses listed are required for graduation. The reason stated for NOT taking the course(s) here at UNLV is because: __________________________________________

Student’s Degree: __________________________________________

Academic Advisor, Chair, or Dean Printed Name ____________________________

Academic Advisor, Chair, or Dean Signature ____________________________

Academic Advisor, Chair, or Dean Telephone # ____________________________ Date ____________

4. To be signed by UNLV Veteran’s Certifying Official.

The above course(s) are required for graduation; the course(s) listed apply to the degree program above.

UNLV Certifying Official Signature ____________________________