Yellow Ribbon Program Application – TC4900B

011115		001				
SMU ID:		SSN:				
Name: (La:	st) (First)	(Middle))		
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Local Address:	(Street)	(City)	(State)	(Zip)		
Phone: ()		SMU EI	lidii.			
Level of Study:	Undergraduate	or	Graduate			
Major:						
I wish to apply for th	e Yellow Ribbon Prog	ram at So	uthern Methodist	University to	use with my	
Post 9/11 GI Bill benefits for the			semester.			
🗆 I understa	nd if I am not making	satisfacto	ry academic prog	ress and I am	placed on	
academic pro	bation I lose my Yello	ow Ribbon	funding. (Check	c box is a requ	uired field.)	
remaining balance o I understand that SM	m responsible for kno f my GI Bill and Yell IU's Yellow Ribbon j demic year. It is my	low Ribbo participati	n benefits. on (amount avail	lable and num	nber of students)	
Signature:			Date:			
For Office Use Only						
Date application receive	ed:	Proce	ssed by:			
Chapter 33 percentage of eligibility:			Eligible:	□ Yes		
				□ No		
Check One: GCox	Grad Dedman	Law	Meadows	□ MSDS		
🗖 UG	□ Theology	Grad Simn	nons 🗖 Guildhall			
Approved: Yes N	0					
Reason, if not approved	l:					