



**INFORMATION AND INSTRUCTIONS FOR COMPLETING THE
EDUCATION BENEFIT ENTITLEMENT RESTORATION REQUEST DUE TO SCHOOL CLOSURE,
PROGRAM SUSPENSION OR WITHDRAWAL
(VA FORM 22-0989)**

HOW TO USE THIS FORM

Use this form to apply for restoration of entitlement for Department of Veterans Affairs (VA) education benefits used at a school that has permanently closed or had its approval to receive VA benefits withdrawn or, due to COVID-19 and between March 1, 2020 and June 1, 2022 has closed temporarily or suspended your program of study. For this form "school" is used interchangeably with "training facility", and "educational institution". Please respond to all required questions regardless of the type of school you were attending.

With limited exception, the VA can restore entitlement only for the period of enrollment in which you did not receive credit (or in which you lost training time). Generally, this means that entitlement can only be restored for the single term you were enrolled in when your program was suspended, your school closed temporarily or permanently, or lost its approval to receive VA benefits, as described above.

NOTE: For any affected enrollment between August 1, 2021 to September 30, 2025, VA is able to restore entitlement for the entire program of education, not just the last term, quarter or semester if you were not able to transfer at least 12 credits to a new school. (The date of this action is effective August 1, 2021).

Entitlement restoration can only be granted for the benefits listed below. Additionally, Public Law 116-140 and Section 1021 of Public Law 116-315 authorized entitlement restoration as indicated.

- Post- 9/11 GI Bill (Chapter 33)
- Survivors' and Dependents' Educational Assistance (DEA) Program (Chapter 35)
- Montgomery GI Bill (MGIB) (Chapter 30)
- Montgomery GI Bill - Selected Reserve (Chapter 1606)
- Post-Vietnam Era Veterans' Educational Assistance Program (VEAP) (Chapter 32)

ENTITLEMENT RESTORATION REQUEST DUE TO SCHOOL CLOSURE, PROGRAM SUSPENSION OR WITHDRAWAL

Part II

In this section "**closed**", "**disapproved**", and "**withdrawn**" are used interchangeably. Respond to all required questions regardless of whether your educational institution temporarily or permanently closed, suspended your program of education (aka program of study or college major) or had its approval withdrawn.

Item 7B. Did your school provide you credit for the classes you were attending when it closed, was withdrawn, or suspended your program of education (example: Your school closed one week before its normal end of term; however your transcript indicates you have received a letter grade for the term)?

Items 9D and 13. You may be eligible for Restoration of Entitlement if you lost credit because your new school accepted, or you anticipate your school to accept fewer than 12 credit hours (or its equivalent if the hours are reported in clock hours). If this applies, you may be eligible to have your entitlement restored for your entire program of education due to the school closure or disapproval (Effective August 1, 2021). For additional information and instructions, please visit <https://www.benefits.va.gov/GIBILL/Restoration.asp>.

HOW TO FILE YOUR CLAIM

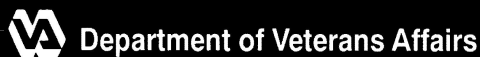
After completing this form please send the completed form via mail to:

**Muskogee Regional Processing Office
Restoration of Entitlement Team
P. O. Box 8888
Muskogee, OK 74402-8888**

This form can also be submitted electronically through Ask VA at:
<https://ask.va.gov/>

PRIVACY ACT NOTICE: VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses as identified in VA system of records, 58VA21/22/28, Compensation, Pension, Education and Veteran Readiness and Employment Records - VA, published in the Federal Register. An example of routine use allows VA to send educational forms or letters with a veteran's identifying information to the veteran's school or training establishment to (1) assist the veteran in the completion of claims forms or (2) for VA to obtain further information as may be necessary from the school for VA to properly process the veteran's education claim or to monitor his or her progress during training. Your response is required to obtain or retain benefits. The requested information is considered relevant and necessary to determine the maximum benefits under the law. Payment of education benefits cannot be made unless the information is furnished as required by existing law (38 U.S.C. 3471). The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.

RESPONDENT BURDEN: An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control Number. The OMB control number for this project is 2900-0859, and it expires 05/31/2027. Public reporting burden for this collection of information is estimated to average 15 minutes per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate and any other aspect of this collection of information, including suggestions for reducing the burden to VA Reports Clearance Officer at VACOPaperworkReduAct@VA.gov. Please refer to OMB Control No. 2900-0859 in any correspondence. Do not send your completed VA Form 22-0989 to this email address.



EDUCATION BENEFIT ENTITLEMENT RESTORATION REQUEST DUE TO SCHOOL CLOSURE, PROGRAM SUSPENSION OR WITHDRAWAL

IMPORTANT - Please read Privacy Act Notice and Respondent Burden Information on Page 1 before completing form.

PART I - APPLICANT IDENTIFICATION AND PERSONAL INFORMATION

1. NAME OF APPLICANT (First, Middle Initial, Last)

2. VA FILE NUMBER (If unknown, provide your Social Security number)

3. CURRENT MAILING ADDRESS (Number and street or rural route, city or P.O., State and ZIP Code)

4. TELEPHONE NUMBER (Include Area Code)

HOME:

MOBILE:

5. EMAIL ADDRESS

PART II - INFORMATION NEEDED TO REVIEW FOR ENTITLEMENT RESTORATION

6A. DID YOUR SCHOOL CLOSE AND OR SUSPEND YOUR INDIVIDUAL PROGRAM OR WAS YOUR PROGRAM WITHDRAWN?

☐ YES ☐ NO (If "Yes", complete Item 6B)

6B. PROVIDE THE NAME AND ADDRESS OF YOUR SCHOOL THAT CLOSED OR WHERE YOUR PROGRAM WAS WITHDRAWN OR SUSPENDED (If more space is needed use Item 12, Remarks)

7A. DID YOU COMPLETE A PROGRAM OF STUDY AT THE CLOSED/DISAPPROVED SCHOOL?

☐ YES ☐ NO

7B. DID YOU RECEIVE CREDIT FOR THE ENROLLED HOURS BEING ATTEMPTED AT THE TIME OF THE CLOSURE, WITHDRAWAL OR SUSPENSION?

☐ YES ☐ NO

7C. WERE YOU STILL ENROLLED IN THE PROGRAM OF STUDY WHEN THE SCHOOL CLOSED WAS DISAPPROVED OR SUSPENDED YOUR PROGRAM?

☐ YES ☐ NO

7D. WERE YOU ON AN APPROVED LEAVE OF ABSENCE WHEN THE SCHOOL WAS CLOSED/PROGRAM WAS SUSPENDED OR WITHDRAWN?

☐ YES ☐ NO

8A. DID YOU WITHDRAW FROM THE SCHOOL PRIOR TO THE SCHOOL CLOSING?

☐ YES ☐ NO (If "Yes", complete Item 8B)

8B. PROVIDE THE DATE OF WITHDRAWAL FROM THE SCHOOL

9A. ARE YOU ENROLLED IN A COURSE OF STUDY AT A NEW SCHOOL?

☐ YES ☐ NO (If "Yes", complete Item 9B)

9B. PROVIDE THE FULL NAME OF YOUR NEW SCHOOL AND PROGRAM

9C. ARE YOU COMPLETING YOUR PROGRAM OF STUDY AT A NEW SCHOOL THROUGH A TEACH-OUT AGREEMENT WITH THE CLOSED/DISAPPROVED SCHOOL?

☐ YES ☐ NO

9D. IF YOU ARE ATTENDING A NEW SCHOOL, DID THEY GRANT 12 OR MORE CREDIT HOURS FOR COURSE(S) TAKEN FROM THE CLOSED/DISAPPROVED SCHOOL? (Please see Item 9D on the Instructions Page)

☐ YES ☐ NO (Or unsure)

10. IF YOU ATTENDED A NON-COLLEGE DEGREE (NCD) SCHOOL THAT WAS CLOSED, SUSPENDED YOUR PROGRAM OR WAS DISAPPROVED, DID THAT SCHOOL TRANSFER ANY HOURS OR CREDITS?

☐ YES ☐ NO

11. WHAT WAS YOUR LAST DATE OF ATTENDANCE AT THE CLOSED OR DISAPPROVED SCHOOL OR IN THE SUSPENDED PROGRAM?

12. REMARKS (If any)

13. ATTESTATION OF HOURS TRANSFERRED

"By signing here, I acknowledge the following:

a. I have transferred fewer than 12 credits from my program at the closed/disapproved facility; and

b. If I am transferred 12 or more credits from such program at a later date, the Secretary will rescind/revoke my restored entitlement."

SIGNATURE

DATE

PART III - CERTIFICATION AND SIGNATURE OF APPLICANT

I CERTIFY THAT all statements in my application are true and correct to the best of my knowledge and belief.

14A. SIGNATURE OF APPLICANT (DO NOT Print) (Sign in ink)

14B. DATE SIGNED (MM,DD,YYYY)

PENALTY - WILLFUL FALSE STATEMENTS AS TO A MATERIAL FACT IN A CLAIM FOR EDUCATION BENEFITS IS A PUNISHABLE OFFENSE AND MAY RESULT IN THE FORFEITURE OF THESE OR OTHER BENEFITS AND IN CRIMINAL PENALTIES.