



# Florida Atlantic University

## Office of Veteran Affairs



### VETERAN TUTORIAL ASSISTANCE PROGRAM INFORMATION

1. Student's Name: \_\_\_\_\_

2. VA Claim No: \_\_\_\_\_

3. Course (Unit Subject): \_\_\_\_\_

4. This student has an academic deficiency in this credit course as evidenced by:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Grades, test results, class performances, etc.)

\_\_\_\_\_  
Signature of Instructor

\_\_\_\_\_  
Date

5. This credit course is required for the completion of the student's program.

\_\_\_\_\_  
Signature of Authorized College Official

\_\_\_\_\_  
Date

6. Tutor's Name: \_\_\_\_\_

Tutor's Qualifications: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Above information verified by: \_\_\_\_\_  
(Instructor, Advisor, Academic Dept., etc.)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title