

**STATEMENT OF UNDERSTANDING AND SELECTED RESERVE SERVICE AGREEMENT
BASIC EDUCATIONAL ASSISTANCE ENTITLEMENT FOR SERVICE IN THE SELECTED RESERVE
(SHORT TITLE: MONTGOMERY GI BILL 2 X 4 PROGRAM)**

For use of this form, see AR 135-7; the proponent agency is DCS, G-1.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 38, USC, chapter 30, and Executive Order 9397 dated 22 November 1943

PRINCIPAL PURPOSE: To explain the eligibility requirements for increased educational assistance benefits under the Montgomery GI Bill 2 x 4 Program; to ensure your understanding of the conditions for entitlement is a matter of record; and to provide a record of your agreement to serve in the Selected Reserve.

ROUTINE USES: Provide information on the increased educational assistance benefits incurred by Selected Reserve service and to verify a soldier's agreement to serve in the Selected Reserve.

DISCLOSURE: Disclosure of your social security number is voluntary; however, if not provided, you will not be eligible for increased educational assistance benefits under the Montgomery GI Bill 2 x 4 Program.

PART ONE, STATEMENT OF UNDERSTANDING

1. INSTRUCTIONS

a. This Statement of Understanding will be read and signed by each soldier who, on release from 24 months of active duty, is entitled to basic educational assistance under the Montgomery GI Bill 2 x 4 Program.

b. The witnessing official will verify the soldier's entitlement and eligibility for membership in the ARNGUS or USAR Selected Reserve; explain the terms and obligations of Selected Reserve service and the increased benefits that can be earned by such service.

2. STATEMENT OF UNDERSTANDING

I have earned entitlement to basic educational assistance under the Montgomery GI Bill 2 x 4 Program. I have completed, or am within 30 days of completing, my initial 24 months active duty obligation.

I understand --

a. I can become eligible for the maximum basic educational assistance benefits as determined by the Department of Veterans Affairs by serving continuously in the Selected Reserve for 4 years.

b. To be eligible for the maximum basic educational assistance benefits I must become a member of the Selected Reserve on release from active duty, or within 12 months following my release from active duty.

c. If I elect Selected Reserve membership, I may be required to be appointed, enlisted, or reenlisted so that I can serve for 4 years in the Selected Reserve.

d. Service in the Selected Reserve means membership in a unit of the Army National Guard of the United States (ARNGUS), a U.S. Army Reserve (USAR) troop program unit, assignment as USAR soldier to an Individual Mobilization Augmentee position, or service on full-time active duty or full-time National Guard duty in an Active Guard Reserve status.

e. Even if I elect Selected Reserve membership, such membership cannot be guaranteed. The availability of a Selected Reserve assignment is based on my residence, grade, and occupational specialty.

f. If I elect Selected Reserve participation, am assigned to the Selected Reserve, and then fail to satisfactorily serve the 4 years, I will lose entitlement to the maximum educational assistance benefits but will retain entitlement to less than maximum educational assistance benefits in amounts determined by the Department of Veterans Affairs.

I REQUEST A SELECTED RESERVE ASSIGNMENT

I DECLINE MEMBERSHIP IN A SELECTED RESERVE

| | |
|-------------|--------------------------------|
| DATE SIGNED | APPLICANT'S SIGNATURE |
| SSN | TYPED OR PRINTED NAME AND RANK |

| | |
|---|----------------------------------|
| NAME | SSN |
| <p>I certify the person whose signature appears above is eligible for basic educational assistance benefits and has completed an initial active duty obligation of 24 months, or is within 30 days of such completion. I have answered all questions to the best of my ability and have explained the obligations incurred by Selected Reserve participation.</p> | |
| DATE SIGNED | SIGNATURE OF WITNESSING OFFICIAL |
| TYPED OR PRINTED NAME AND RANK | |

PART TWO, SELECTED RESERVE SERVICE AGREEMENT

1. INSTRUCTIONS:

This Selected Reserve Service Agreement will be completed ONLY when an applicant:

- a. Agrees to serve in the Selected Reserve for entitlement to the maximum basic educational assistance benefits.
- b. Is eligible for assignment to the Selected Reserve, to include appointment, enlistment, or reenlistment if appropriate and required.
- c. Has read and signed Part One (*Statement of Understanding*) above.
- d. Has a confirmed assignment in a position vacancy of the Selected Reserve.

2. SELECTED RESERVE SERVICE AGREEMENT:

I hereby agree to serve for at least 4 years in the Selected Reserve to earn entitlement to the maximum basic educational assistance benefits offered by the Department of Veterans Affairs under the Montgomery GI Bill 2 x 4 Program. In connection with this agreement, I understand:

- a. To become a member of the Army National Guard of the United States I must be appointed, or enlisted, as appropriate.
- b. If I have insufficient time remaining on my statutory or contractual service obligation, or if I have been discharged, I must be appointed, enlisted, or reenlisted in the U.S. Army Reserve, as appropriate.
- c. I must serve satisfactorily as prescribed by National Guard or Department of the Army regulations for the obligated 4 years.
- d. My entitlement to 36 months of basic educational assistance benefits under the Montgomery GI Bill 2 x 4 Program is limited to 10 years from the date of my release from active duty, or the date on which the 4-year Selected Reserve requirement is met, whichever is the later. However, there are provisions in law which provide exceptions or extensions to the 10-year limitation that are administered by the Department of Veterans Affairs.
- e. I will retain entitlement to the maximum basic educational assistance benefits if, prior to completing the 4 years of Selected Reserve service, I am discharged or released from service in the Selected Reserve for any of the following reasons:
 - (1) A service-connected disability.
 - (2) A medical condition which preexisted my becoming a member of the Selected Reserve and which the Secretary determines is not service connected.
 - (3) Hardship.
 - (4) Discharged or released after 30 months of the Selected Reserve service for the convenience of the Government.
 - (5) Involuntarily discharged or released for the convenience of the Government as a result of a reduction in force.
 - (6) A physical or mental condition not characterized as a disability not resulting from own misconduct.
 - (7) Cease to be a member of the Selected Reserve during the period beginning on 1 October 1991 and ending on 30 September 1999, by reason of inactivation of my Selected Reserve unit of assignment or by reason of involuntarily ceasing to be designated as a member of the Selected Reserve pursuant to 10 USC 10143(a).

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| NAME | SSN |
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PART TWO, SELECTED RESERVE SERVICE AGREEMENT (Continued)

f. The continuity of Selected Reserve service shall not be considered as broken if I am assigned to the Individual Ready Reserve or the Inactive National Guard for a period not to exceed 12 months based on the following reasons:

(1) I am released from Active Guard Reserve status and I am pending reassignment to another Selected Reserve category.

(2) I am transferred to the Individual Ready Reserve or Inactive National Guard for cogent personal reasons based on hardship or employment. This is provided my reasons have been verified and my transfer was approved by the appropriate authorities.

g. Except for the provisions of paragraphs e and f above, if I am separated from the Selected Reserve before I complete 4 years, I will terminate my eligibility for the maximum basic educational assistance benefits, but will retain my entitlement to basic educational benefits. I will be subject to refund any unearned portion of the maximum benefits. One month of the maximum benefit is earned for each 4 months of Selected Reserve service.

| | |
|-------------|-----------------------|
| DATE SIGNED | APPLICANT'S SIGNATURE |
|-------------|-----------------------|

| | |
|-----|--------------------------------|
| SSN | TYPED OR PRINTED NAME AND RANK |
|-----|--------------------------------|

I certify the person whose signature appears above is eligible for assignment, appointment enlistment, or reenlistment, as appropriate, for service in the Army National Guard of the United States, or U.S. Army Reserve, with concurrent assignment to a Selected Reserve position vacancy. I further certify this applicant has been, or is being, assigned to a confirmed position vacancy in the Selected Reserve.

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|-------------|----------------------------------|
| DATE SIGNED | SIGNATURE OF WITNESSING OFFICIAL |
|-------------|----------------------------------|

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| TYPED OR PRINTED NAME AND RANK |
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