



TEACH GRANT CONFIRMATION

PRINT Student Name _____ Mustangs ID # _____

SECTION A: To be completed by the STUDENT:

- | | | |
|---|-----|----|
| 1. Have you been accepted into the Education program?
<i>(If NO, the student is not eligible to receive the TEACH Grant)</i> | YES | NO |
| 2. What is your Class Level?
<i>(Post-Baccalaureate students, such as Certificate Program, Teacher Certification and 2nd Baccalaureate are not eligible.)</i> | UG | GR |
| 3. What is your current cumulative grade point average (cgpa)? _____ (must be at least 3.25) | YES | NO |
| 4. Do you intend to begin a career in teaching? | YES | NO |
| 5. Do you intend to teach in a 'high-need' field?

If YES, which 'high-need' field? _____
If NO, the student is not eligible to receive the TEACH Grant. | YES | NO |
| 6. Do you agree to serve for at least four years as a full-time, highly qualified teacher in a school serving low-income students within 8 years of graduation from college? | YES | NO |
| 7. Do you understand that failure to teach four years in a high-need field at a low-income school will convert the TEACH Grant to a DIRECT UNSUBSIDIZED LOAN? | YES | NO |
| 8. Do you understand that you must sign an Agreement to Serve (ATS) and complete Entrance Counseling before the TEACH Grant funds will be disbursed? | YES | NO |
| 9. Have you printed a copy of the TEACH Grant 'Fact Sheet' and 'Overview' of the TEACH Grant program?
<i>(available at http://www.mwsu.edu/finaid/teach)</i> | YES | NO |
| 10. I wish to be considered for the TEACH Grant for the following semester/term (check only ONE) and I understand this TEACH Grant Confirmation form must be completed for the Fall/Spring and/or Summer terms in which I wish to be considered for the TEACH Grant:

<input type="checkbox"/> Fall 20 ____ and/or Spring 20 ____ <input type="checkbox"/> Summer I 20 ____ and/or Summer II 20 ____ | | |

I intend to begin a career in teaching and agree to serve as a full-time teacher in a high-need field in a public or private elementary or secondary school that serves low-income students. I understand that I must teach for at least four academic years within eight calendar years of completing the program of study for which I received a TEACH Grant. I further understand that failure to complete these teaching obligations will convert my TEACH Grant to a Direct Unsubsidized Loan. I will complete the Agreement to Serve (ATS) contract before my TEACH Grant funds will be disbursed to me. I have received a copy of the 'Fact Sheet' and 'Overview' of the TEACH Grant.

STUDENT Signature

Date

SECTION B: To be completed by the MSU College Education:

The MSU College of Education has reviewed the information, as above, and confirms the student is eligible to receive the TEACH Grant.

Signature of MSU College of Education Representative

Date

FAO USE ONLY:

Action taken _____