

2020-2021 Graduate Federal TEACH Grant Application

Student Name: _____ Student ID#: _____

Email: _____ Phone: _____

GRANT INFORMATION

The College Cost Reduction and Access Act of 2007 created the Teacher Education Assistance for College and Higher Education (TEACH) Grant Program, which provides up to \$4,000 per year to graduate students who commit to **1)** teach full-time **2)** in high-need subject areas **3)** for a least four years AND **4)** at schools that serve student from low-income families. If the commitment is not fulfilled, the grant is permanently converted to a loan to be repaid by the recipient. The loan is an unsubsidized Direct Federal Stafford Loan with interest calculated from the time of the grant disbursement.

A: STUDENT ELGIBILITY

I certify that I meet or I will meet the student eligibility requirements as follows:

- I have completed (or will complete) the **2020-2021 FAFSA**.
- I am a U.S. Citizen or eligible non-citizen.
- I have met the **Unconditional Acceptance** to the Masters in Teaching Program
- I am enrolled in coursework that is necessary to begin a career in teaching or plan to complete such coursework. Coursework that will prepare a student to teach in a high-need subject area is acceptable (see areas specified in the annual listing at: www.ed.gov/about/offices/list/ope/pol/tsa.doc).
- I meet the following academic requirements:
 - Maintained a cumulative **GPA** of at least **3.25** throughout the academic program for which the TEACH grant is received
 - AND have **passed** the **West-B**
- I will complete 2020-2021 **TEACH Grant** counseling each year at: I will sign a 2020-2021 **TEACH Grant** Agreement to Serve and Promise to Pay each year at: <https://teach-ats.ed.gov/ats/noteSearchTerms.action>

B: GRANT REQUIREMENTS

- I will teach for a least **4** years in a school serving low-income students (see annual directory at: www.tcli.ed.gov/CBSWebApp/tcli/TCLIPubSchoolSearch.jsp) in a **High Need subject** area as a **highly** qualified teacher
- I will provide documentation to the U.S. Department of Education that I completed the teaching obligation and this will be certified by the elementary or secondary school's chief administrator officer after **4** academic years of teaching service.

C: STUDENT CERTIFICATION

I understand that the **TEACH Grant** program has specific service obligations that must be met in order for the award to remain as a grant. If I fail to meet all of the conditions of the award or if the conditions are not documented as required, I understand that the award will permanently convert to an Unsubsidized Direct Federal Stafford Loan and that I will be responsible to repay this loan with interest calculated from the disbursement date of the grant. I understand that once a **TEACH Grant** is converted to a loan; it cannot be converted back to a grant.

Student Signature: _____ **Date:** _____

Return signed and completed form(s) or other documents to your local campus.

Main Campus: 3240 Fort Rd, Toppenish, WA 98948 Phone: (509) 865-8502 Fax: (509) 865-1853 Email: financial_aid@heritage.edu