ANGELO STATE UNIVERSITY
COLLEGE OF EDUCATION
Teacher Education Assistance for College and Higher Education (TEACH) Grant

Application Form

PRINT CLEARLY IN ALL FIELDS

CAMPUS ID
NUMBER _____ DATE _____

Name of   ☐ Mr.
Applicant   ☐ Ms.

_____   _____
Last   First   Middle   Other names which may appear on
                                              academic record

Permanent Mailing
Address

_____   _____
Number & Street, P.O. Box, etc.   Area Code & Phone Number

_____   _____ _____
City   State   ZIP Code

Email Address _____

PROGRAM INFORMATION

☐ Undergraduate Student   ☐ Graduate Student

Degree Program: _____

Certification Option(s): _____

Date Accepted into the Educator Preparation Program (EPP): _____

Declared/Intended Shortage Field (mark one of the following):

☐ Bilingual Education & English Language Acquisition   ☐ Reading Specialist   ☐ Special Education

☐ Foreign Language _____   ☐ Science   ☐ Mathematics

☐ Other teacher shortage areas* documented as high-needs by the Federal government, State government, or a local education agency, approved by the U.S. Department of Education.

   *Must Specify _____

UNDERGRADUATE STUDENTS MUST MEET ONE OF THE FOLLOWING ELIGIBILITY REQUIREMENTS:

☐ Score above the 75th percentile on a college admissions test (SAT/ACT); or

☐ Graduate from high school with a cumulative GPA of at least 3.25 (on a 4.0 scale) to receive a grant as a freshmen; or

☐ Have a cumulative GPA of at least 3.25 (on a 4.0 scale) on all college coursework to receive a grant for each subsequent term (a GPA of at least 3.25 must be maintained)

GRADUATE STUDENTS MUST MEET ONE OF THE FOLLOWING ELIGIBILITY REQUIREMENTS:

☐ Score above the 75th percentile on a college admissions test (SAT/ACT/GRE); or

☐ Have an undergraduate cumulative GPA of at least 3.25 (on a 4.0 scale) to receive a grant in the first term; or

☐ Have a cumulative GPA of at least 3.25 (on a 4.0 scale) through the most recent term in the Master's degree program; or

☐ Be a current teacher or be a retiree from another occupation with expertise in a high-needs field, enrolled in a Master's degree program; or

☐ Be a former teacher pursuing an alternative route to certification within a Master's degree program

DOCUMENTS THAT <u>MUST</u> BE ATTACHED:

➢ Confirmation of completed FAFSA
➢ Verification of eligibility requirement selected above

PLEASE RETURN COMPLETED APPLICATION TO:
ANGELO STATE UNIVERSITY
TEACHER EDUCATION OFFICE
CARR #145

The information given in this application is to be used for consideration for an Angelo State University TEACH Grant and is correct to the best of my knowledge. I also understand and agree that the decision made on my application by the University will be final and that all application materials submitted shall become the property of Angelo State University.

_____   _____
                  Signature of Applicant   Date

FOR OFFICE USE ONLY

The applicant has completed TEACH Grant Initial Counseling.

_____
              Signature   Date

☐ Head, Department of Curriculum & Instruction
☐ Head, Department of Kinesiology
☐ Head, Department of Teacher Education

Prepare One Original:
1 Original – Financial Aid Office
1 Copy – Department
1 Copy – Student