Arkansas State University
Financial Aid & Scholarships
2012-2013 TEACH Grant Application - Graduate

PO Box 1620 • State University, AR 72467 • Ph (870) 972-2310 • Fax (870) 972-2794

ARKANSAS STATE UNIVERSITY

Name (Last Name, First Name, Middle Name/Initial)	
ASU ID Number	Phone Number ( )

Please check each of the following items before signing and submitting this form.

__ I am eligible to receive the TEACH Grant, based on the following:
Indicate with a checkmark the qualification that applies to you:
__ I am a current, former or retired teacher pursuing a master's degree.
__ My current cumulative GPA is at least 3.25, or
__ I have tested above the 75th percentile on a nationally-recognized admissions test (ACT, SAT, or GRE).
(Please **attach** a copy of the test certification verifying your score was above the 75th percentile.)

__ I understand that this grant is intended only for students who plan to become teachers in a high-need subject field, and who plan to teach in low-income schools as determined by the federal government or state, which is subject to change.

__ I understand that I will have to complete an ASU TEACH Grant application each award year that I am eligible.

__ I understand that I will have to complete an entrance counseling for the TEACH Grant each year that I am eligible.

__ I understand that I will have to sign an Agreement to Serve for the TEACH Grant each year that I am eligible.

__ I understand that if I am not able to meet the conditions outlined in the Agreement to Serve, the TEACH Grant will convert to a Federal Direct Unsubsidized Loan, and interest will be added to the principle from the disbursement date of the TEACH Grant, in which I am responsible for repaying.

__ I understand that in order to keep the grant from becoming a loan, I must teach for four of the eight years following the completion of my program, in a high-need subject area, and in a low-income school regardless of the number of years I received the grant.

__ I understand that if I have already been awarded up to my cost of attendance, receiving the TEACH grant will result in the reduction of my federal subsidized, unsubsidized loan, and/or PLUS loan award.

__ I understand that I am required to serve as a full-time teacher at least four academic years within eight calendar years after I complete or withdraw from the academic program in which I received the TEACH Grant.

__ I understand that transfer credit hours must meet the 3.25 G.P.A. eligibility requirement to be a recipient of the TEACH Grant.

Please indicate the graduate program at Arkansas State University for which you have been accepted:

__ MSE in Special Education P-4
__ MSE in Reading
__ MSE in Special Education 4-12
__ MSE in Biology
__ MSE in Chemistry
__ MSE in Mathematics
__ MAT in Middle Level Education
__ MSE in School Counseling
__ Math and Science Emphasis
__ MSE in Spec Ed Gifted, Talented and Creative

Conditions of the TEACH Grant

By signing this form, I am certifying that I have read this form and all enclosures thoroughly. I understand by signing and submitting this form, I am requesting the ASU Office of Financial Aid and Scholarships to determine my eligibility for the TEACH grant and, if I am eligible, revise my award package to include this grant.

X _____ _____

STUDENT SIGNATURE DATE

Completion of the TEACH Grant application does not ensure receipt of the grant.
The TEACH Grant amount is prorated based on enrollment.