TEACH Grant Application

Name (please print clearly) ___________________________________________ Student ID# ____________________________

Phone Number ( ) ___________________________________________ Email ____________________________

The Teacher Education Assistance for College and Higher Education (TEACH) Grant Program provides grants to students who agree to teach for at least four years at an elementary school, secondary school, or educational service agency that serves students from low-income families. The terms and conditions of this grant can be found in the Agreement to Serve (www.teach.ats.ed.gov) which must be signed each year prior to the TEACH Grant disbursing to your student account.

1. Are you formally admitted into a Teacher Education Program at NDSU? _____ Yes _____ No

   If yes, check which high-need Teacher Education Program below:
   _____ Agricultural Education   _____ French Education
   _____ Spanish Education   _____ Mathematics Education
   _____ Biological Sciences Education   _____ Social Science Education
   _____ Chemistry Education   _____ Earth Science Education
   _____ Comprehensive Science Education   _____ Other ________________________________

2. Is your Teacher Education Program listed in the Department of Education’s Annual Teacher Area Nationwide Listing located at https://www2.ed.gov/about/offices/list/ope/pol/teacheshortageareasreport2017.pdf for the state in which you plan to teach? If so which state?
   _____ Yes State ___________________________
   _____ No

   NOTE: Listings on both websites are subject to change from year to year. To meet the Agreement to Serve requirement, BOTH your teacher education program and school must be listed on the Department of Education’s websites at the time you begin teaching.

3. Which academic requirement do you meet to qualify you for the TEACH Grant? (check only one)
   _____ I scored above the 75th percentile on one battery of a college admissions test (eg. SAT, ACT, GRE)
   _____ I have a cumulative GPA of at least 3.25 through my most recent semester completed at NDSU or the school from which I am transferring from.

4. Do you intend to meet the Agreement to Serve requirement by teaching in a high-need subject area at a school that serves low-income students for at least four of the eight years following graduation?
   _____ Yes _____ No

5. For which semester(s) are you applying for this grant?
   _____ Fall   _____ Spring   _____ Summer

   I understand that the TEACH Grant will be converted into an Unsubsidized Federal Direct Loan if I do not fulfill the requirements as stated in the Agreement to Serve. If the grant is converted to a Federal Direct Loan I will be responsible for this loan with interest, calculated from the disbursement date of the grant. I also understand that if the TEACH Grant is converted to a loan, it cannot be converted back to a grant.

Student’s Signature ___________________________ Date _____/_____/_____

For office use only

___ SOE  ___ Checklist  ___ Disburse on CC
___ 75% or 3.25  ___ Email Student  ___ Award on COD
___ Award on CC  ___ ATS  ___ Disburse on COD

RETURN THIS COMPLETED AND SIGNED FORM TO:
Mailing address: NDSU Student Financial Services • Campus address: 202 Ceres Hall
Phone: 1-866-924-8969 or (701) 231-6221 • Fax: (701) 231-6126 • E-mail: Julie.Flakker@ndsu.edu

Last Revised: 4/17