

## **TEACH Grant Application**

NAME	STUDENT ID #		
CURRENT			
ADDRESS	CITY	STATE	ZIP
E-MAIL ADDRESS	_CURRENT PHONE#		
Are you formally admitted into a Teacher Educa (You must attach copy of your admittance le		State University?	YesNo
If yes, check which high-need Teacher Education	on Program below:		
English Teaching	Social Studies TeachingUrban Early Childhood EducationUrban Elementary Education	-	ndary Education
the school from which I am	at least a 3.25 from my most recent complet		•
Do you intend to meet the Agreement to Serve students for at least four of the eight years follow			that serves low-income
Is your Teacher Education Program currently listate in which you plan to teach?	*		
Is your chosen school(s) listed as a school that s of Education's <u>Annual Directory of Designated Low</u> enter the name of your school(s)]?	-Income Schools located at [click on the SEAR	•	-
-	o change from year to year. To meet the Ag partment of Education's website at the time st have been designated as high-need on the	you begin teaching,	and;
I certify that:			
	of Financial Aid for in person Teach Gran	t counseling.	
<ul> <li>I must maintain a minimum GPA of 3</li> <li>I understand that this grant may become my Agreement to Serve obligation.</li> </ul>	.25 to receive the Teach Grant. ne a loan with retroactive interest accrued for the following of the following interest accrued for the following interest account for the following	om the date of disb	ursement if I do not fulfill
Signature	Date		

Metropolitan State University Financial Aid Office 700 East Seventh Street Saint Paul, MN 55106-5000