



GRAND CANYON UNIVERSITY<sup>®</sup>

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## TEACH Grant Teacher Verification Form

Award Year 2017-2018

**Student Name:** \_\_\_\_\_ **GCU Student Number:** \_\_\_\_\_

I certify that the above named student of Grand Canyon University is currently serving as a full-time, certified teacher at:

\_\_\_\_\_

located in the state of \_\_\_\_\_.

I understand this information will only be used for the purpose of determining eligibility along with other factors for a TEACH Grant for this employee while attending Grand Canyon University during the 2017-2018 award year.

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Date: \_\_\_\_\_

School Representative Signature\*: \_\_\_\_\_

*\*Signature of school official certifies the above student is currently teaching full-time as defined by the institution or governing district*

**NOTE: HANDWRITTEN SIGNATURE REQUIRED – TYPED/ELECTRONIC SIGNATURE NOT ACCEPTED**

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