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## TEACH Grant Appeal Form

Award Year 2018-2019

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

The following programs are subject to 2018-2019 TEACH Grant eligibility based on the federal high needs content area that the student commits to teaching in upon degree completion. Please check the student's program of study:

B.S. Early Childhood Ed and Early Childhood Special Ed

B.S. Elementary Ed and Special Ed

B.S. Elementary Ed: Math

B.S. Elementary Ed: Science

Master of Ed: Elementary Ed (Licensure and non-licensure)

Masters of Ed: Elementary Ed (Nevada Alternative Program)

Masters of Ed: Secondary Ed (Licensure and non-licensure)

Masters of Ed: Secondary STEM Ed (Nevada Alternative Program)

Master of Ed: Early Childhood and Early Childhood Special Ed (Licensure and non-licensure)

In order to be reviewed for 2018-2019 TEACH Grant eligibility, the student must disclose the type of high needs content area that the student plans on committing to teaching at the time of graduation.

Please list the high needs content area that the student will commit to teach upon degree completion:

\_\_\_\_\_

Additional information (if applicable):

**Official Use Only**

College of Education Representative Name: \_\_\_\_\_ Decision: \_\_\_\_\_  
*(Note: this is not the SSC, SSM, or RDO)*

College of Education Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments/Notes:

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**Student Acknowledgement (*Do not complete until the box above has been completed*):**

The high needs content area and state in which I plan on teaching upon degree completion listed on this form accurately represents my plans at the time of graduation. I have read the comments provided by the College of Education representative in the box above and agree to the terms specified to satisfy the TEACH Grant requirements. I am aware that if I do not satisfy the TEACH Grant requirements, the grant will be permanently converted into an unsubsidized loan with interest that I will have to repay.

My signature below represents my agreement to this statement.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***\*\*Note: Actual signature required- no typed signature or electronic signature***