GRAND CANYON UNIVERSITY™

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.

High needs content area: _____

State in which the student plans on teaching 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:

_____

_____

_____

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