



2008-2009

Academic Certification of TEACH Grant Eligibility

PMT09

OSU CWID (8-digits) or SSN (9 digits) (No Spaces)

Grid for entering OSU CWID or SSN digits

Student Name: _____

This form is to be completed by an OSU College of Education academic counselor or faculty member.

The above student has met the academic requirements necessary to establish eligibility to receive a Teacher Education Assistance for College and Higher Education (TEACH) Grant beginning the term listed below;

- Semester/Year _____
As of the date below, this student is in the TEACH eligible major of _____
The student has scored above the 75th percentile on one of the batteries of the listed nationally-normed admissions test:
o Test Name _____
o Date of Test _____
o Test Battery Used to Determine Eligibility _____
o OR Student currently has a 3.25 or higher cumulative grade point average (GPA) and falls into one of the two categories listed below:
_____ Student is a first semester freshman and had a 3.25 cumulative GPA from high school.
_____ Student has a college cumulative GPA of 3.25 or higher.
o OR Student is a graduate student who is currently a teacher, and is either retiring or has expertise in a shortage area (math, science, special education, English as a second language or another high-need subject). _____

Name of Certifying Official: _____ Title: _____

Signature: _____ Date: _____

Department: _____ Phone: _____

College of Education faculty and/or staff have discussed with me the academic and career implications once the TEACH grant is received. I wish to accept this grant.

Name of Student: _____ Date: _____

Student Signature: _____

Return to: Office of Scholarships and Financial Aid 119 Student Union, Stillwater, OK 74078-5061 Email: finaid@okstate.edu Phone: (405) 744-6604 www.okstate.edu/finaid

Fax: (405) 744-6438 (if you fax, please do not mail the form)