

PRELIMINARY ELIGIBILITY and RECOMMENDATION FOR TEACH GRANT

This form is to be completed and returned to Peggy Peel, Coordinator, Teacher Certification Office, (WEBH 226 B). Contact: peelmm@webster.edu, 314-968-7058.

STUDENT ID # _____

Name: _____
Last First Middle (Maiden)

Address: _____
Number and Street

_____ City State Zip

Telephone: _____ / _____ / _____
Home Work Cell

Email: _____

PROGRAM: _____ UNDERGRADUATE _____ MAT _____ PBC (CERTIFICATION ONLY)

I am pursuing certification in: (Teach Grant is available only for these areas)

_____ ESOL _____ Math _____ Unified Science
_____ Foreign Language _____ Reading Specialist _____ Special Education

My Cumulative GPA is _____ Note: This must be at least 3.25 and is cumulative of all courses taken, graduate and undergraduate, all schools)

_____ I have been accepted to the Teacher Certification Program. (Must have received letter from Teacher Certification Office.)

I have read and understand the requirements for the Teach Grant and understand that this is only a preliminary application for recommendation for the grant. Once I receive the recommendation from the School of Education I will contact the Financial Aid Office to proceed with the application for the Teach Grant. All other administration of the grant will be handled by the Financial Aid Office.

Signature: _____ Date: _____

We have reviewed the eligibility requirements for _____ and recommend that he/she be considered for the Teach Grant.

Peggy Peel,
Coordinator, Teacher Certification

Brenda Fyfe,
Dean, School of Education