The University of North Carolina at Pembroke Office of Financial Aid

Office: 910-775-4620
Fax: 910-775-4159

TEACH Grant Request Form

Name: ____________________________________________   Banner ID#______________________________
(Please Print)

Mailing Address:___________________________________________________________________________________

E-Mail Address:__________________________________________ Phone: ________________________________

Indicate below which semester you are requesting TEACH Grant

__Fall Semester   __Spring Semester   __Maymester   __Summer I

Before submitting this application, review the TEACH Grant eligibility criteria. You may refer to the fact sheet on the web site at https://studentaid.ed.gov/sa/types/grants-scholarships/teach

_____ I have filed the 2020-2021 FAFSA

_____ I am a U.S. citizen or eligible non-citizen

______ I scored at the 75th percentile on a college admission test/or maintain a cumulative 3.25 GPA

______ I have a pre-education major code indicated as part of my student record

_____ I plan to teach in an identified teacher shortage, high-need field

_____ I plan to teach in a school serving low-income students

Identified field:______________________________________

Is this a federal or state field: ______________________

If it is a state field, in which state do you plan to teach: _________________

Enrollment:  Fall 2020___ credit hours;   Spring 2021___ credit hours;   Summer 2021___credit hours

Are you an undergraduate or a graduate student? ______________________________

I verify that the above information is correct and understand if I make any changes it is my responsibility to notify the Financial Aid Office immediately.

Student Signature ____________________________________________       Date: ____________
(Electronic signatures not acceptable)