The University of North Carolina at Pembroke Office of Financial Aid
Office: 910-521-6255 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 2022-2023 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 2022___ credit hours; Spring 2023___ credit hours; Summer 2023___ 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)