Phone: 607-777-2428 Fax: 607-777-6897 Email: finaid@binghamton.edu www.bingfa.binghamton.edu

TEACH Grant Request for Review

Student Name:	B-Number:
	ege and Higher Education (TEACH) Grant Program provides up to intend to teach full-time in high-need subject areas for at least four ow-income families.
At Binghamton University, only graduate levare eligible, but the maximum grant will be r	vel programs are eligible for TEACH grant funds. Part-time students reduced, see chart on TEACH web page.
	uld help you to complete the necessary steps in order to be ant. You must complete this form each year you wish to receive the
Before our office can review your elig	gibility, you must complete the following:
I have reviewed the TEACH Grant aid/grants/teach-grant.html	t policies on https://www.binghamton.edu/financial-aid/types-of-
	ation for Federal Student Aid (FAFSA) for the academic year I
I have completed the 2024-2025 T	TEACH Grant Entrance Counseling at www.studentaid.gov
www.studentaid.gov	TEACH Grant Agreement to Serve or Repay at
	ion of the Academic Eligibility section and met with a
	of Teaching, Learning and Educational Leadership. ion of the Financial Aid section in this packet and met with a
· · · · · · · · · · · · · · · · · · ·	the consequences of not completing the TEACH grant requirements
	ou have successfully completed the above steps and adjust your Grant. All steps must be completed before you will be awarded
	completed by the Student:
eligible graduate program, as determined by	that in order to receive TEACH funding, I must be enrolled in an y Binghamton University, which will prepare me to teach as a highly- ubject area for at least four years at a school serving low-income
described above if I do not fulfill all federal r also confirm that the decision to accept the	ntion of receiving the TEACH Grant, which may become a loan as requirements as determined by the U.S. Department of Education. I TEACH Grant is my own: if I do not agree to the fulfillment ole to meet them, I should not submit this form to the Binghamton
Student Signature:	Date:

Student Name:	B-Number:
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Academic Eligibility

To be completed by a Kateri Reagan, Senior Staff Assistant Department of Teaching, Learning and Educational Leadership Academic B, Room 126A:

Student's	Enrolled Program:
Please in	itial next to the requirement by which the student meets TEACH Grant eligibility:
☐ Th	ne student scored above the 75 th percentile on the Graduate Record Examination (GRE).
	ne student has achieved a 3.25 cumulative GPA (on a 4.0) scale on college coursework. The student ust maintain this GPA during his/her enrollment in the program.
Ple	ease indicate the student's most recently calculated GPA. Semester:
	GPA:
□ s/h se □ s/h gra □ the	scussed the following with the above named student: ne will be obligated to be a highly-qualified, full-time teacher in a high-need subject area at a school erving low-income students, ne must complete the four years of teaching within eight years of finishing the program for which the ant was received, e definition of a Highly-Qualified Teacher according to federal law, and e definition of "high-need" subject areas, as defined by the Department of Education.
	e: Date:
I have dis ✓ th a ✓ th ✓ th ✓ th ✓ th	completed in person with a Financial Aid Counselor after all other steps are completed: Socussed the following with the above named student: In that if s/he does not fulfil the requirements of the Agreement to Serve, s/he will be required to repay the grant as in Unsubsidized Federal Direct Student Loan with interest accrued and capitalized from the time of disbursement, the affect that the TEACH funding will have on other financial aid, that once the grant is converted to a loan, it can't be converted back to a grant, and sow to contact the Department of Education for additional information or in the event that the student is unable to the terms of the TEACH grant. Binghamton University Financial Aid Counselor: Date: Date:
	Please indicate the date in which the following were completed:
	FAFSA: Entrance Counseling: (TCHENT) Agreement to Serve or Repay: (TCHATS)