

**2024-2025 Teacher Education Assistance for College and Higher Education (TEACH)  
Grant Application**

Name: \_\_\_\_\_ JHU ID: \_\_\_\_\_

Email: \_\_\_\_\_ Degree/Major/Program: \_\_\_\_\_

**Eligibility requirements:** Check all that apply (*please be prepared to provide documentation to the Financial Aid Office if requested*):

- I achieved a post-secondary/undergraduate cumulative 3.25 GPA
- I scored above the 75<sup>th</sup> percentile on one or more portions (math, verbal, etc.) of a national, standardized post-secondary admission test (ACT/SAT/GRE)
- I am a current or former teacher or retiree from another occupation

Please **INITIAL** after carefully reading each line.

- I have been admitted to the School of Education.
- I have completed the 2024-25 FAFSA at [www.studentaid.gov](http://www.studentaid.gov).
- I am a U.S. citizen or eligible non-citizen.
- I understand I must maintain a cumulative GPA of at least 3.25.
- I understand I must sign a TEACH Grant Agreement to Serve to be eligible for the grant.
- I understand I will be required to complete both pre- and post-TEACH Grant counseling sessions online.
- I understand that if I do not meet the teaching service requirements, I must repay the grant as a Federal Direct Unsubsidized Loan, with interest accrued from the date the grant funds were disbursed.
- I understand that for each TEACH-grant eligible program for which I received TEACH Grant funds, I must serve as a highly-qualified, full-time teacher, in a [low-income school](#), for a total of at least 4 academic years within 8 calendar years after I complete or withdraw from the academic program for which I received the TEACH grant.
- My coursework is necessary to begin/complete a career in teaching in a critical shortage subject area.
- My certification is in a high-need field. Please check the high-need field that you will teach:
 

<input type="checkbox"/> ESOL	<input type="checkbox"/> Earth/Space
<input type="checkbox"/> Spanish	<input type="checkbox"/> Chemistry
<input type="checkbox"/> Special ED	<input type="checkbox"/> Physics
<input type="checkbox"/> Mathematics	
- Other High-Need Field or [Teacher Shortage Area](#):

I acknowledge that I am requesting an award for the 2024-25 academic year.

I have/will enroll in the **number of credits listed below** and understand that award amounts are prorated based on each semester enrollment status.

**Summer 2024 credits:** \_\_\_\_\_ **Fall 2024 credits:** \_\_\_\_\_ **Spring 2025 credits:** \_\_\_\_\_

\_\_\_\_\_  
Student Signature Date

**ONCE COMPLETED, PLEASE SUBMIT THIS FORM TO YOUR ACADEMIC ADVISOR FOR APPROVAL**

ACADEMIC ADVISOR APPROVAL		
Approved: _____	_____	_____
Advisor's Signature	Printed Name	Date

ACADEMIC PROGRAM APPROVAL		
Approved: _____	_____	_____
Program Administrator Signature	Printed Name	Date