## Teach Grant Request Form

Submit via:	Confidential Document Submission Portal: <u>https://www.csub.edu/finaid/upload</u>
or Return to:	California State University, Bakersfield
	Office of Financial Aid & Scholarships
	48 SA
	9001 Stockdale Highway, Bakersfield, CA 93311-1022
	Telephone: (661)654-3016 FAX: (661)654-6800 Web: <u>http://www.csub.edu/financial-aid</u> E-Mail: <u>finaid@csub.edu</u>

2024	-2025
SullA ST	ATE UNIT



Student Name:		CSUB Id:	
-	(Please print)		

By requesting a Federal Teach Grant, I understand that I am responsible for knowing all conditions of eligibility, including but not limited to the following:

Eligibility of Disbursement:

- I understand my CSU Bakersfield GPA must be 3.25 or higher
- I understand my award will be pro-rated based on enrollment
- I understand that my combined financial aid from all sources may not exceed my Cost of Attendance (COA).
- I understand that receiving the Teach Grant may affect my other aid.
- I understand that TEACH Grant funds will be paid after CENSUS date of the semester(s) for which I have applied and am eligible.
- I understand I must complete the TEACH Grant Counseling and TEACH Grant Agreement to Serve: <a href="https://studentaid.gov/teach-grant-program">https://studentaid.gov/teach-grant-program</a>

## Agreement to Serve & Annual Certification

You will need your FSA ID and Password (the same one that you used on your FAFSA).

- For every year that I receive a TEACH Grant, I understand I must complete the online Agreement to Serve (available once school creates award) and TEACH Grant Counseling at <a href="https://studentaid.gov/teach-grant-program">https://studentaid.gov/teach-grant-program</a>
- Upon completion of my program (or when I cease to be enrolled in the program) I understand:
  - I must complete TEACH Grant Exit Counseling. : <u>https://studentaid.gov/teach-grant-program</u>
  - o I must complete the TEACH Grant annual certification: <u>https://studentaid.gov/teach-grant-program</u>
  - o I will NOT receive reminders from CSU Bakersfield, nor from the Department of Education.

\_\_\_\_ I understand that I have 14 days, from the date the grant funds are delivered to *my*CSUB fee account, to request cancellation of the grant. After 14 days, if I wish to cancel the grant, I may be required to repay it as an unsubsidized loan with interest due from the date of delivery.

**Certification & Signature** 

Signing below certifies that all the reported information is complete a	nd
correct.	

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

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Student Signature

Date