University of Dubuque

TEACH Grant Eligibility Statement

Academic Year: 20_____ - 20_____

Name:		SSN:		
Date of Birth:	//	U.S. Citizen:	Yes	No
Major:				
Permanent Home A	\ddress:			
Street:				
		State:		
Requirement:				
75 percentile or hig	gher (ACT 25	gher, OR a standardize 5 or SAT 590, or higher) (3.25 or higher is r		re that is in the
My test score:	(not re	equired if cumulative GI	PA is 3.25 or h	nigher).
FAFSA filed:	Yes	No		
		to the best of my know ds to a teaching degree	_	n currently (or
Signature		Date		
		WRITE in this area).		·
ENT: /	ATS:	Originated:		
Disbursement #1:		Disbursement #2:		