



2023-2024 Federal TEACH Grant Academic Advisor Acknowledgement

** Not required for graduate students or undergraduate students who have received the TEACH grant at MBU previously **

Section 1: To be completed by the student

Name: _____

Advisor: _____

MBU ID: _____ Telephone Number: (____) _____

Major or Intended Major: _____

Cumulative GPA: _____ Program (circle): MBCW/UC VWIL PEG Online

(First year students use cumulative high school GPA; transfer students use cumulative GPA from most recent college work).

Section 2: To be completed by the advisor

Name: _____

Department: _____

Check next to applicable statements below. All statements must apply for TEACH grant to be awarded:

___ This student has discussed plans with me to take coursework intended to work toward teacher licensure.

___ This student and I have discussed the coursework necessary for teacher licensure.

___ This student plans to seek teacher licensure endorsement in the following area(s):

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

Questions? Contact the Financial Aid Office

by email to: finaid@marybaldwin.edu	by phone at: 540-887-7022	in person at: Administration Building Ground Floor
--	------------------------------	--