



STATE OF TENNESSEE
TENNESSEE STUDENT ASSISTANCE CORPORATION
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www.TN.gov/collegepays

MINORITY TEACHING FELLOWS PROGRAM

Type or print in ink. In order to have your application processed, **all information must be received at TSAC by the April 15 deadline. Incomplete or late applications will not be considered.** See Additional Required Attachments on the back of this application. The awards are highly competitive and subject to the availability of funding. **Note: If you have received a bachelor's degree, you are ineligible to apply for this award.**

1. Name _____ 2. Social Security No. _____
Last First Middle
3. Date of Birth _____ 4. Are you a United States citizen? ___ Yes ___ No
Month Day Year
5. Are you a legal resident of Tennessee? ___ Yes ___ No 6. County of Legal Residence _____
7. Permanent Address _____
Street City State Zip Code
8. Telephone Number (____) _____
9. E-Mail Address _____
10. Gender ___ Male ___ Female 11. Race _____ American Indian/Alaskan Native ___ Hispanic
_____ Asian/Pacific Islander ___ White
_____ Black
_____ Other _____
Specify
12. Driver's License State _____ Number _____
13. What grade level are you applying for? ___ Freshman ___ Sophomore ___ Junior ___ Senior

HIGH SCHOOL INFORMATION

14. Where did/will you receive your diploma? _____
Name of High School
15. When did/will you graduate? _____ 16. List your ACT Score _____ or SAT Score _____
Month, Year
17. What is your Grade Point Average on a 4.0 scale? _____
18. **Attach separate sheet (s)** showing all extracurricular activities in high school and college. Give the length of time you were a member. List all officer, chairperson, or leadership positions you held and the length of time you held them. Also, list evidences of your commitment that would indicate an interest in teaching.

COLLEGE INFORMATION

19. What Tennessee institution will you attend to earn your teaching credentials?

Name of College or University
20. Expected graduation date _____
Month, Year
21. Have you ever attended other colleges or universities? ___ Yes ___ No
22. If you answered Yes to #21 what is your GPA _____ and number of hours that you have completed _____
23. If you answered Yes to #21, list your previous colleges, graduation date, and degree earned.

Name of College/University

Degree Earned

REFERENCE INFORMATION (Please list a family member)

24. Name _____
Last First Middle

25. Relationship to Applicant _____ 26. Home Telephone Number (____) _____

27. Permanent Address _____
Street City State Zip Code

28. Employer _____ 29. Employer Telephone Number (____) _____

30. Employer Address _____
Street City State Zip Code

CERTIFICATION BY THE APPLICANT

I understand that this application must be completed in full and received by TSAC by April 15 to be considered. I understand that an incomplete application will not be considered. I certify that I have read this application in full and it is accurate to the best of my knowledge. I agree to provide, if requested, any other data necessary to verify such information. I authorize any educational institution that I attend to release to TSAC or to its agents any information requested by such persons pertinent to this award (i.e., enrollment status, current address, academic grades achieved, etc.). I affirm that any funds obtained as a result of this application will be used solely for the expenses related to attendance at the postsecondary educational institution that I attend. After receipt of Teacher Certification, I affirm my intent to teach in a Tennessee public school one year for each year the award is received at the prekindergarten, kindergarten, elementary or secondary level. Prior to the receipt of the fellowship, I understand that I must sign a promissory note that states the terms of the fellowship, which include teaching requirements or repayment of the award if I do not teach at an eligible Tennessee public school. I further understand that I will be eligible to receive the scholarship for more than one year, if I am a full-time student in teacher education with at least a 2.5 college grade point average.

SIGNATURE OF APPLICANT

DATE SIGNED

ADDITIONAL REQUIRED ATTACHMENTS: (1) High school applicant must attach an official high school transcript with seven semesters and official ACT/SAT scores, **or** college applicants must attach an official college transcript. (2) Submit an essay of less than 250 words on the topic “Why I Chose Teaching as a Profession” and (3) submit two reference letters: **a)** one from a community person who is not a member of the applicant's family and **b)** one from a teacher who taught the applicant in high school or college. The references should comment on the applicant’s interest in education, character, time known, and extracurricular activities. (4) Submit a separate sheet identifying extracurricular activities, leadership positions, and length of time involved.

CERTIFICATION BY SCHOOL OFFICIAL

I have reviewed the completed application. I hereby certify that, to the best of my knowledge, it is accurate and complete. I have informed the applicant that the high school transcript, college transcript (if applicable), and additional attachments are required with this application. Note: Please ensure that the grade point average and official ACT/SAT score are on the transcript.

HIGH SCHOOL CERTIFICATION

SIGNATURE OF HIGH SCHOOL OFFICIAL

DATE SIGNED

PRINT NAME OF HIGH SCHOOL OFFICIAL

TITLE

(____) _____
HIGH SCHOOL TELEPHONE NUMBER

COLLEGE/UNIVERSITY CERTIFICATION

SIGNATURE OF COLLEGE/UNIVERSITY OFFICIAL

DATE SIGNED

PRINT NAME OF COLLEGE/UNIVERSITY OFFICIAL

TITLE

(____) _____
COLLEGE/UNIVERSITY TELEPHONE NUMBER

