



**MISSISSIPPI STATE UNIVERSITY™**  
**STUDENT FINANCIAL AID**

Post Office Box 6035  
 Mississippi State, MS 39762-6035  
 Email: SFADocuments@msstate.edu

**2017-2018**  
**TEACH Grant Major Counseling Form**

\_\_\_\_\_  
**Student's Name**

\_\_\_\_\_  
**(9 digit) MSU ID**

This form is required for TEACH Grant applicants who have not been admitted into an eligible TEACH Grant program of study or if it is unclear whether your major meets the TEACH Grant major criterion. MSU College of Education Academic advisors will help to determine your major eligibility for this program, **then you and the advisor will complete this form and submit it to our office.**

**MSU College of Education Advisor:**

Please check the option that best applies to this student:

\_\_\_\_\_ After counseling with this student, it is my opinion that he/she has the academic ability to be successful in a curriculum that will allow him/her to teach as required by the Federal TEACH Grant Program. Further, this student has indicated that he/she intends to complete the curriculum and intends to pursue employment as a teacher in a position that meets the requirements of the Federal TEACH Grant Program. Therefore, it is recommended that the MSU Department of Student Financial Aid continue with the process to determine eligibility for a TEACH Grant Award.

\_\_\_\_\_ After counseling with this student, it has been determined that he/she does not meet, or does not intend to meet, the University requirements necessary to complete a program of study that will allow the applicant to be employed as a teacher in a position that meets the Federal TEACH Grant requirements. Therefore, it is recommended that the student's application for a TEACH Grant Award be cancelled.

\_\_\_\_\_  
**Advisor Name (print)**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Advisor Signature**

\_\_\_\_\_  
**Student Signature**