

# 2017-18 Educational Aide Exemption Application

INDICATE APPLICABLE TERM:

Fall

Spring

Summer

The purpose of the Educational Aide Exemption Program is to encourage educational aides to complete full teacher certification. If awarded, applicants are exempt from the payment of tuition and certain mandatory fees at Texas public institutions of higher education. Applications should be completed and turned into the Financial Aid Office ([Texas Administrative Code, 21.1080](#)).

## Section I. COMPLETED BY APPLICANT (All items below must be completed)

Last Name	First Name	MI	Social Security Number
Street Address			Phone Number
City	State	Zip	Email
<b>CERTIFICATION: I hereby certify that I am enrolled in courses required for a teacher certification in one or more subject areas determined by the Texas Education Agency to be experiencing a critical shortage of teachers at the public schools. See Section III</b>			
Applicant's Signature			Date

## Section II. COMPLETED BY AUTHORIZED DISTRICT OFFICIAL (Must be applicant's current employer)

Applicant's Job Title	Initial Date of Employment	Currently Employed Yes ( ) No ( )
School District Name	County District Number	
School District Address	Phone	
City	State	Zip Fax
Employment history is based on the teacher service record. Complete the section that applies below.		
Applicant has been employed as an Educational Aide by a public school district in Texas working in a teaching capacity, in the classroom, directly with students on a full-time basis.  _____ Total number of full-time days in the last five years that meet the above criteria.	Applicant has been employed as a <b>substitute teacher</b> by a public school district in Texas, in a teaching capacity, working in the classroom directly with students.  _____ Total number of full-time days in the last five years that meet the above criteria.	
Name of Authorized District Official	Title of Authorized District Official	
<b>CERTIFICATION: I hereby certify that the information provided in Section II is accurate and verifiable.</b>		
Authorized District Official's Signature		Date

**Section III. COMPLETED BY FINANCIAL AID OFFICE**

Institution Name	FICE Code
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Applicant's Texas Residency Status Resident ( )    Non-Resident ( )	Applicant's Selective Service Status Registered ( )    Exempt ( )	Applicant's Financial Need (COA-EFC-Other Aid)
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Applicant's Program of Study

In accordance with [Texas Administrative Code, 21.1083 \(6\)](#), Educational Aide Exemption recipients must be enrolled in courses required for teacher certification in one or more areas that the Texas Education Agency has determined to be experiencing a critical shortage of teachers at public schools in Texas.

Teacher Shortage Areas for the 2017-18 school year:

- Bilingual/English as a Second Language
- Career and Technical Education
- Computer Science/Technology Applications
- Mathematics
- Science
- Special Education - Elementary and Secondary Levels

Name of Authorized Official	Title of Authorized Official
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**CERTIFICATION:** I hereby certify that all rules and regulations were adhered to in determining applicant's eligibility.

Signature of Authorized Official	Date
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Applicant's eligibility must be confirmed for every term awarded.