## **2018-19 Educational Aide Exemption Application**

Fall	Spring	Summer	

INDICATE ALL APPLICABLE TERMS:

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 (<u>Title 19 of the Texas Administrative Code (TAC)</u>, <u>Chapter 21</u>, <u>Subchapter II</u>). Applications should be completed and turned into the Financial Aid Office.

SECTION I. COMPLETED BY APPLICANT (All items below must be completed)								
Last Name First Nar	ne	MI	Socia	Social Security Number				
Street Address			Phon	Phone Number				
City Star	te Zi	ip	Emai	Email				
CERTIFICATION: I hereby certify that I a determined by the Texas Education Age				tification in one or more subject areas chers at the public schools. See Section III				
Applicant's Signature	Date							
SECTION II. COMPLETED BY AUTHORIZED DISTRICT OFFICIAL (Must be applicant's current employer)								
Applicant's Job Title	yment Currently Employed Yes ( )		Currently Employed Yes ( ) No ( )					
School District Name		County District Number						
School District Address				Phone				
City	State	Zip		Fax				
Employment history is t	pased on the teacher service	e record. Comp	lete the	e section that applies below.				
Applicant has been employed as an Educ school district in Texas working in a teac classroom, directly with students on a fu	hing capacity, in the	Applicant has been employed as a <i>substitute teacher</i> 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 above criteria.	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						
CERTIFICATION: I hereby certify that the information provided in SECTION II is accurate and verifiable.								
Authorized District Official's Signature			Date					

SECTION III. COMPLETED BY FINANCIAL AID OFFICE								
Institution Name	FICE Code							
Applicant's Texas Residency Status Resident ( ) Non-Resident ( )	Applicant's Selective Service Status Applicant's Financia Registered ( ) Exempt ( )			Need (COA-EFC-Other Aid)				
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 2018-19 school year:  Billingual Education/English as a Second Language  Career and Technical Education  Mathematics  Special Education - Elementary and Secondary Levels								
Name of Authorized Official	Title of Authorized Official							
CERTIFICATION: I hereby certify that all rules and regulations were adhered to in determining applicant's eligibility.								
Signature of Authorized Official				Date				
Applicant's eligibility must be confirmed for every term awarded.								