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Student ID (E Number) Last Name First Name

PBT: TEACHER CERTIFICATION FORM FOR THE COLLEGE OF EDUCATION

STUDENT

Please complete and submit this form to:

Certification Office
College of Education
1420 Buzzard Hall
Eastern Illinois University
600 Lincoln Avenue
Charleston IL 61920

YOU MUST BE ENROLLED IN THE CLASSES LISTED ON YOUR TEACHER CERTIFICATION FORM BY THE COLLEGE OF EDUCATION TO BE ELIGIBLE FOR FINANCIAL AID.

Major: _____

Beginning Date of Program: _____

Completion Date: _____

COLLEGE OF EDUCATION

The individual identified above is seeking a Federal Direct Loan and has indicated that teacher certification is being pursued. To process the loan, we are required to have on file, a listing of those courses needed by the student to meet certification requirements. Please identify these minimum requirements and submit a listing as soon as possible to the Office of Financial Aid. Submit it to our office in person (Student Services Building East Wing), via email at **finaidverification@eiu.edu** or by fax at 217-581-6422.

Thank you for your assistance.

EASTERN ILLINOIS UNIVERSITY
EASTERN ILLINOIS UNIVERSITY
OFFICE OF FINANCIAL AID AND SCHOLARSHIPS
600 LINCOLN AVENUE, CHARLESTON, IL 61920
TELEPHONE: **217-581-6405** FAX: **217-581-6422** EMAIL: **FINAIDVERIFICATION@EIU.EDU**