

# Paul Douglas Teacher Scholarship Program

## Teaching Confirmation Form

The scholarship recipient must teach two years for each year of scholarship assistance or one year for each year of assistance if teaching in a US Department of Education approved Teacher Shortage Area. In order to receive credit toward your teaching obligation, please complete this form and mail to:

**Georgia Student Finance Commission**  
2082 East Exchange Place  
Tucker, Georgia 30084  
1-888-414-2692 or 770-724-9400

### Part I – To be completed by Scholarship Recipient

I declare that I am teaching full-time, as it is defined at the end of this form, in a public or private non-profit preschool, elementary, or secondary school. (A scholar who was continuously employed in an “education program” in which he or she taught, rather than in school, should check here \_\_\_\_\_.)

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

School Year Starting: \_\_\_\_\_ School Year Ending: \_\_\_\_\_

Grade Level(s) Taught: \_\_\_\_\_

Did you teach at more than one school this year? \_\_\_\_\_

Description of Teaching Assignment:

Signature: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Address: \_\_\_\_\_

### Part II – To be completed by School Official

I certify that the information stated above is true. The person named above is or was teaching full-time, as defined on Page 2, at the above named school (or was continually employed in an “education program” in which he or she taught) for the period indicated above.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_  
School Official

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(please type or print)

### Part III – To be completed by School Official (if applicable)

I certify that the scholar named above taught an average of one or more classes per day for the period indicated in a **Teacher Shortage Area** designated by the US Department of Education.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_  
School Official

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(please type or print)

( ) **REQUEST FOR DEFERMENT**

I request deferment of repayment of my PDTS account from \_\_\_\_\_ to \_\_\_\_\_.

( ) **REQUEST FOR CASH REPAYMENT**

I am unable to repay my account(s) by service at this time and request information on cash repayment.

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## Teaching Confirmation Form (continued)

### Part IV– To be completed by School Official<sup>1</sup> (if applicable)

I certify that the scholar named above taught an average of one or more classes per day for the period indicated in a **Teacher Shortage Area** designated by the US Department of Education.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_  
School Official

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(please type or print)

### FULL-TIME TEACHING STATUS (EXPANDED)

#### Paul Douglas Teacher Scholarship Program

Scholars must teach on a full-time basis, which generally means to “teach the same number of hours required of teachers who have full-time contracts, as determined by the institution or agency in which an individual is teaching, for a minimum of one academic term, as defined by the institution or agency in which an individual is teaching.”

*If the scholar is teaching in other than a typical full-time/full-year position, the school principal or his or her designee should attach a narrative statement describing the teaching service provided by the scholar (i.e., number of days taught, average number of classes per day, the number of classes per day taught by a typical full-time teacher, subject and grade level of classes, and any other pertinent information that may assist the State agency in evaluating the scholar’s teaching service).*

In determining whether a scholar has taught full-time for purposes of the Douglas Scholarship teaching obligation, the school principal or his or her designee should consider the following:

<sup>1</sup>The certifying official for Teacher Shortage Areas in Colorado, Nebraska, Oklahoma, or Wisconsin is the Chief State School Officer. A separate form for TSA certification by the CSSO’s office may be developed.

**FULL-TIME TEACHING STATUS**  
**Paul Douglas Teacher Scholarship Program**

In determining that a scholar has taught full-time for purposes of the Douglas Scholarship, the school principal or his or her designee should consider the following:

Any activities required to support classroom teaching, such as testing and evaluation of students, a reasonable allowance for "prep time", or other required activities may be considered in addition to classroom hours.

Full-time substitute teaching may be credited toward the teaching obligation, provided that the scholar teaches a minimum of one term each year. Credit for one term or more of teaching will be pro-rated if it is less than a full school year.

Scholars who are technically classified as part-time, but whose teaching schedule is the same as that of the typical full-time teacher may receive credit as having taught full-time.

If a scholar teaches less than a full school year, then teaching during summer school may be credited toward the teaching obligation. Other conditions contained in this section apply to teaching summer school. Teaching during the summer plus part of the regular school year cannot exceed one year of credit.

A teaching contract is not required in the employment situations above in order to receive credit toward the teaching obligation.

Scholars who are still teaching may receive credit previously denied for prior years under the liberalized conditions of this section. The State is encouraged to advise scholars of these changes, so that the scholar may request review of teaching credit by the State or request revised teaching certification form(s) for re-evaluation by the school principal.

A copy of this section should be made available to school principals for use in evaluating the applicant's teaching record for current or prior years.

Volunteer activities may not be credited in classifying the scholar as teaching full-time.

Teacher's assistants or aides are not eligible for credit.

**MUST BE COMPLETED AND RETURNED TO:**

**Georgia Student Finance Commission  
2082 East Exchange Place, Tucker, Georgia 30084**

**PERSONAL DATA SHEET  
PAUL DOUGLAS TEACHER SCHOLARSHIP**

**Section A – Scholar Information**

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_ DOB: \_\_\_\_\_  
Last Name First Middle Initial Maiden Name

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Street Address City, State Zip

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Work Address: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Work Address: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

**Section B – Family Information**

*Check One*

Father  Stepfather  Guardian

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Employer: \_\_\_\_\_

*Check One*

Mother  Stepmother  Guardian

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Employer: \_\_\_\_\_

**Section C – Personal References**

PERSON OTHER THAN PARENTS OR SPOUSE WHO WILL KNOW YOUR ADDRESS AT ALL TIMES: (List at least 3)

1. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_

2. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_

3. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_

4. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_

**SIGNATURE OF SCHOLAR:** \_\_\_\_\_ **DATE:** \_\_\_\_\_