

**United States Department of Education
Project PIONERAS Scholarship Recipient's Obligation Requirements - In-Service Teacher
(Repay Clause)**

Note: Please initial by each point, indicating that you 'agree and will comply' and then sign at the end on the signature line. (Texas Woman's University hereafter referred to as the "University.")

As a recipient of Project PIONERAS Grant money, I affirm that:

1. ____ I understand that if I do not fulfill my contractual obligations to TWU as herein agreed (i.e. maintaining a 3.0 GPA, maintaining a grade of "B" or better in all graduate coursework, completion of the approved course plan), TWU reserves the right to withdraw my PIONERAS Grant support (scholarship and/or book money) and award the money to another student.
2. ____ I understand that requirements and policies of the University as described in the Graduate School Catalog and the Student Handbook apply. When I register for a course, I accept responsibility for adhering to the University requirements.
3. ____ I understand that I will register for and successfully complete the 3 graduate courses and the full Graduate Program if selected on which PIONERAS Grant funding is based, and that any changes made to the course plan must be approved by the grant director.
4. ____ I understand that, if I have not earned Bilingual/ESL supplemental certification or this has expired, I will take the Bilingual/ESL Supplemental TExES as part of my participation in Project PIONERAS.
5. ____ I understand that any unapproved changes to the course plan will result in: (a) forfeiture of future PIONERAS Grant funding, and (b) re-payment by me to Texas Woman's University of any PIONERAS Grant funding that I previously received, including stipends and reimbursements.
6. ____ I understand that any equipment and/or materials purchased with Project PIONERAS stipend will be my property upon successful completion of the program.
7. ____ I understand that I must be an employee of _____ School in Denton ISD to participate in PIONERAS.
8. ____ I understand that I must secure written authorization from parents and school administrators for any audio/videotaping and/or pictures that I may take of children in conjunction with graduate coursework and forward copies of authorizations secured to the school district's Bilingual/ESL or corresponding department.
9. ____ I understand that I will provide pertinent information (contact information and school assignment changes, etc.) from the date of my admission to PIONERAS to up to 3 years from my program completion as per sponsoring agency requirements.
10. ____ I understand that I will provide aggregated academic achievement data of my students from the date of my admission to PIONERAS to up to 3 years from my program completion as per sponsoring agency requirements, if still employed by a participating Denton ISD school.
11. ____ I understand that I have a contractual obligation to pay back the PIONERAS Grant funding received IF I do not fulfill expectations set forth in this document.

Grant Recipient's Printed Name

Grant Recipient's Signature

Date

Director of Project PIONERAS

Date