



**United States Department of Education  
Project PIONERAS Scholarship Recipient's Obligation Requirements – Pre-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", and the Department of Teacher Education, hereafter referred to as the "Department."*)

*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 undergraduate 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 Undergraduate 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 undergraduate courses (5 if participating in the Study Abroad Program) 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 I will take the Bilingual Target Language Proficiency Test (BTLPT-Spanish 190) 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 it is my responsibility to comply with international travel and academic requirements if I participate in PIONERAS Study Abroad program.
7. \_\_\_\_ 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