



2010-11 APLE APPLICATION

SECTION I: TO BE COMPLETED BY THE APPLICANT (Please print or type)

1. Last Name		First Name	Middle Initial	2. * Social Security Number - SSN	
3. Street Address			City	State	Zip Code
4. Date of Birth MM / DD / YYYY / /	5. Telephone Numbers Home # () Cellular or Alternate # ()	6. Email Address			
7. Do you owe a refund on any state or federal educational grant? <input type="checkbox"/> Yes <input type="checkbox"/> No					

8. College units I have completed: Undergraduate units: _____ Sem/Qtr Graduate units: _____ Sem/Qtr

9. I currently hold or expect to receive the following credential(s): (If selecting #4 you must also select either #1 or #2)
- (1) Preliminary/Clear Single Subject in _____ Date received or expected: ____ / ____ / ____
 - (2) Preliminary/Clear Multiple Subject Date received or expected: ____ / ____ / ____
 - (3) Special Education Teaching Credential ** Date received or expected: ____ / ____ / ____
 - (4) Supplementary Authorization in _____ Date received or expected: ____ / ____ / ____

**If you currently hold a preliminary or clear single subject or multiple subject credential, to be eligible for APLE, you must be pursuing a Reading Specialist Credential/Certificate, or Special Education Credential in either Adapted Physical Education, Speech-Language Pathology Services Credential in Language, Speech and Hearing or Language, Speech and Hearing and Audiology with Special Class Authorization, or a Education Specialist Instruction Credential.

Note: School Counseling, School Psychology and Educational Administration are not eligible.

10. I currently have received or have been approved to receive an educational loan:
- Yes, please complete the information below.***
 - No. If you have not been approved to receive an educational loan, you are not eligible to apply for APLE.

***If yes, indicate the lender, type, and status of all your educational loans:

	Loan Type		Loan Status		Loan Balance	Lender/Service
	Subsidized	Unsubsidized	Good	Defaulted		
<input type="checkbox"/> Stafford	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	_____
<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	_____

11. I intend to provide teaching service in the following areas in California - **(Check only one):**

- (1) **Mathematics / Computer Education** - Must be pursuing a single subject credential, which authorizes teaching Math in grades 7 – 12.
- (2) **Science (Life/Physical)** - Must be pursuing a single subject credential, which authorizes teaching Science (Life/Physical) in grades 7 – 12.
- (3) **Foreign Language** - Must be pursuing a single subject credential, which authorizes teaching in a Foreign Language in grades 7 – 12.
- (4) **Special Education** - Must be pursuing a Special Education credential, which authorizes teaching in grades K – 12. (See your APLE Coordinator for credentials classified under this credential type.)
- (5) **Business** - Must be pursuing a single subject credential, which authorizes teaching in Business in grades 7 – 12.
- (6) **Agriculture**- Must be pursuing a single subject credential, which authorizes teaching in Agriculture in grades 7 – 12.
- (7) **Industrial Arts** - Must be pursuing a single subject credential, which authorizes teaching in industrial arts in grades K – 12.
- (8) **School Serving Rural Areas****** - Must be pursuing a multiple subject or single subject credential, and agree to teach at a school serving rural areas in grades K – 12.
- (9) **State Special Schools** - Must be pursuing a specialist credential, which authorizes teaching at a State Special School in grades K – 12.
- (10) **School with a High Percentage of Provisional Permit Teachers****** - Must be pursuing a multiple subject or single subject credential and agree to teach at a school w/ a high percentage of provisional permit teachers in grades K – 12.
- (11) **Designated Low-Income School****** - Must be pursuing a multiple subject or single subject credential and agree to teach at a designated low-income school in grades K – 12.
- (12) **Low-Performing School******- Must be pursuing a multiple subject or single subject credential and agree to teach at a school ranked in the bottom 20% of the Academic Performance Index (API) grades K – 12.

**** The identified areas change annually. For a listing of schools in these areas, please refer to the <http://www.cde.ca.gov>

Note: The teaching area you indicate on this application cannot be changed at a later date without the prior written approval of the Commission.

Please Turn To The Back Of The Application To Continue

* Please see attached State of California Information Practice Act (IPA) of 1977 & Use of Your Social Security Number.

2010-11 APLE APPLICATION CONTINUED – EFFECTIVE 1/1/09

The following information is for statistical purposes:

12. Age _____	13. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	14. Ethnicity: (check one) <input type="checkbox"/> (1) African American <input type="checkbox"/> (2) Latino, Chicano <input type="checkbox"/> (3) Filipino <input type="checkbox"/> (4) Pacific Islander <input type="checkbox"/> (5) Asian American <input type="checkbox"/> (6) Native American <input type="checkbox"/> (7) Caucasian <input type="checkbox"/> (8) Other _____	
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By my signature I understand and agree that:

- I agree to obtain a California K – 12 credential and teach in my designated subject area in an eligible California schools grades K – 12.
- I must have received, or have approval to receive, an eligible educational loan.
- I must have completed at least sixty (60) semester or ninety (90) quarter units of postsecondary education prior to the beginning of the fall term of the 2010-11 academic year.
- I must be enrolled in the 2010-11 academic year in coursework leading to a baccalaureate degree or in a professional teacher preparation program and maintain half-time enrollment per term, as defined by my institution.
- I must maintain satisfactory academic progress as defined by my institution through receipt of the initial teaching credential.
- I must sign a Loan Assumption Agreement.
- **My application and Loan Assumption Agreement (LAA) must be submitted to the APLE Coordinator at my educational institution by the deadline the Coordinator's Office has set.**
- I must provide four full-time consecutive school years, or on a part-time basis for the equivalent of four full-time school years, of qualifying teaching service in the area that I have designated in item #11 of this application.
- I will comply with all student loan repayment obligations and continue making scheduled payments on student loan(s) until notified by my lender that the loan is paid in full.

I declare under penalty of perjury, under the laws of the State of California, that all statements contained in this application and any accompanying documents is true and correct, with full knowledge that all statements made in this application are subject to investigation. Any false or dishonest answer to any question may be grounds for denial to participate in APLE. I do not owe a refund on any state or federal educational grant or have not defaulted on any student loan. I authorize the Commission to receive and release my student records, and any application information between institutions and appropriate public and private agencies. If requested, I will provide documentation to verify all information provided.

Please sign and date:

Signature of Applicant

Date

Student School Identification Number

PLEASE RETURN TO THE APLE COORDINATOR AT YOUR SCHOOL

**SECTION II: TO BE COMPLETED BY APPLICANT'S COLLEGE OFFICIAL
AND SUBMITTED TO THE COMMISSION WITH THE 2010-11 SELECTION SUMMARY SHEET
FOUND IN THE APLE COORDINATOR'S GUIDE**

1. The applicant's expected standing in college during the 2010-11 fall term:

- Junior
 Senior
 Continuing undergraduate
 Graduate - pursuing teacher certification

2. Type of program the applicant will be enrolled in during the 2010-11 academic year:

- (1) An academic program leading to a baccalaureate degree.
 (2) An academic program of professional teacher preparation.
 (3) A district intern program.
 (4) An internship program which requires a CTC Internship Credential to teach.



3. Date the applicant is expected to complete training for:

a preliminary / clear teaching credential: _____ / _____ / _____

a preliminary / clear credential in Special Education: _____ / _____ / _____

By my signature, I hereby declare that under penalty of perjury, under the laws of the State of California, the above information is true as reflected on current official school records. If requested I must provide documentation to verify all information provided.

Signature of APLE Coordinator

School Name

Printed or Typed Name of APLE Coordinator

Title of APLE Coordinator

Date

Email Address

Phone Number (Ext.)



CALIFORNIA STUDENT AID COMMISSION
P.O. Box 419029, Rancho Cordova, CA 95741-9029
ASSUMPTION PROGRAM OF LOANS FOR EDUCATION (APLE)
LOAN ASSUMPTION AGREEMENT Academic Year 2010-11

NAME:

TEACHING SERVICE AREA:

I, the undersigned APLE participant, understand and agree to the following:

SECTION I - COURSEWORK REQUIREMENTS

I must:

1. Maintain enrollment in an approved eligible institution and maintain satisfactory progress in either an academic program leading to a baccalaureate degree or a program of professional teacher preparation that has been approved by the Commission on Teacher Credentialing (CTC); and
2. Maintain a minimum of half-time enrollment in baccalaureate or credential coursework per academic term, as defined by my institution; and
3. Complete coursework and training necessary to obtain an initial teaching credential **other than an emergency credential** which requires receipt of a baccalaureate degree and completion of a CTC approved program of professional teacher preparation which includes a student teaching requirement and authorizes service for kindergarten through 12th grade.

NOTE: My initial teaching credential is a preliminary or clear multiple or single subject teaching credential unless I have agreed to provide teaching service in reading or special education. If I have agreed to provide teaching service in special education or reading, my initial teaching credential is a specialist credential in special education or in reading.

SECTION II - EDUCATIONAL LOAN OBLIGATION

I must:

1. Report **all** outstanding educational loans to the California Student Aid Commission (Commission) prior to receiving payment.
2. Comply with all student loan repayment obligations and continue making scheduled payments on student loan(s) until notified by my lender that the loan is paid in full. I understand that an APLE loan assumption payment will not cancel or replace any scheduled student loan payments.
3. Provide written notification to the Commission within 10 days of any change in the status of my student loans, including notice of default and the sale, transfer or consolidation of my student loans to another lender or servicer.
4. Be free of any obligation to repay any state or federal educational grant and not be in default on any student loan.

SECTION III - LOAN ASSUMPTION BENEFITS

I understand that in order to qualify and receive the full APLE benefits I must:

1. Obtain an initial **teaching** credential and provide four full-time, or on a part-time basis for the equivalent of four (4) full-time academic consecutive, or its equivalent, school years in the teaching service area in an eligible California school listed at the top of this Agreement.
2. Begin the first school year of eligible teaching service in kindergarten through 12th grade in a eligible California school within 36 months from the date I obtain my initial teaching credential.
3. The term of the loan assumption agreement shall be no more than 10 years from the date signed by me and accepted by the Commission.

SECTION III - LOAN ASSUMPTION BENEFITS (CONT.)

4. Loans eligible for loan assumption payments are educational loans under the Federal Family Education Loan Program (20 U.S.C. Section 1071, et seq.) and any educational loan approved by the Commission.
5. The Employment and Loan Verification Forms must be forwarded to the appropriate officials for completion and submission to the Commission. The forms must be returned by the deadline to qualify for benefits.
If I fail to meet a deadline, I may be withdrawn from the program. I agree to allow the Commission to change my teaching service area, if it is determined that it is necessary to make me eligible for a benefit loan assumption payment on my eligible education loan.
6. Educational loans obtained for coursework other than a baccalaureate degree and an initial teaching credential **are not** eligible for assumption under the APLE.
7. Depending on my June 30th outstanding loan balance each year and the state budget*, the Commission will issue loan assumption payments directly to lender(s)/servicer(s) as follows:
 - Up to \$2,000** after completing my first school year of eligible full-time, or on a part-time basis for the equivalent teaching service.
 - Up to \$3,000** after completing my second consecutive school year of eligible full-time, or on a part-time basis for the equivalent teaching service.
 - Up to \$3,000** after completing my third consecutive school year of eligible full-time, or on a part-time basis for the equivalent teaching service.
 - Up to \$3,000** after completing my fourth consecutive school year of eligible full-time, or on a part-time basis for the equivalent teaching service.
8. Loans which are eligible for total or partial cancellation under state or federal provisions will never be eligible for assumption under the APLE even if I do not apply for the cancellation benefits or do not qualify for the benefits during subsequent years of eligible teaching service.
9. If the Commission determines that any loan assumption payment was authorized based on misleading or incorrect information, I must reimburse such payment to the Commission.

SECTION IV - ADDITIONAL REQUIREMENTS

I must:

1. Respond to all communications and requests from the Commission within the time indicated or may be withdrawn from APLE.
2. Provide written notification to the Commission within 10 days of any change in my legal name or address or of any change in status which affects my APLE eligibility.
3. Comply with any procedures deemed necessary and appropriate by the Commission, all conditions cited in this Agreement and all applicable rules and regulations. **If I fail to comply, this Agreement will become invalid and I will be withdrawn as a participant.**

**\$1,000 of additional loan assumption benefits per year may be provided if I teach mathematics, science (grades 7-12), or special education in a school ranked in the lowest 60th percentile of the A.P.I. If I teach in these subject areas in a school ranked in the lowest 20th percentile of the A.P.I. I may be eligible for an additional \$1,000 after each year of service, up to four years.

* ** FUNDING APPROXATIONS ARE CONTINGENT UPON APPROVED CALIFORNIA BUDGET ACTS.

BY MY SIGNATURE, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE INFORMATION

Signature _____

Date _____

**Social Security Number _____

Telephone Number _____

E-mail Address _____

Mailing Address _____

City _____

State _____

Zip Code _____

State of California Information Practices Act (IPA) of 1977 & Use of Your Social Security Number

State as well as federal law protects the individual's right to privacy in information pertaining to oneself. The State of California IPA of 1977 requires that the following information be provided to applicants for financial aid who are asked to supply information about them. The principal purpose for requesting information on this form is to determine your eligibility for financial aid. Maintenance of this information is authorized by the Commission policy and the policies of the postsecondary institutions to which you are applying for aid. Furnishing information requested on this form is mandatory. Failure to provide such information will delay and may even prevent your receipt of financial assistance. Information furnished on this form may be transmitted to the state and federal governments if required by law. Individuals have the right of access to records established from information furnished on this form as it pertains to them. The official's responsible for maintaining the information contained on this form is the Executive Director of the Commission and the financial aid administrators at the institutions to which you are applying for financial aid.

The Social Security Number is used to verify your identity under record-keeping systems established prior to January 1, 1975, pursuant to authority of the Commission. The California State University and the California Community Colleges contained in Title 5, California Administrative Code Section 41201, and authority of the Regents of the University of California under Article IX, Section 9 of the California Constitution.

The Commission and California public postsecondary education institutions, in compliance with federal statutes and the Equal Protection Clause of the California Constitution, do not discriminate on the basis of race, color, national origin, sex or handicap in any of the policies, procedures, or practices. Inquiries regarding these equal opportunity policies may be directed to the Commission and to their financial aid office of the school or college to which you are applying for aid.