

**2017 Teacher Shortage Loan Forgiveness Program
Letter of Certification
from
School District Superintendent or School Principal**

Please contact NDUS at 701-328-2964 if you have questions.

Please return this Letter of Certification on -or- after 4/3/2017. Please do not email your documents.

Mail: North Dakota University System, 600 E Boulevard Ave., Dept. 21, Bismarck, ND 58505-0602
In Person: State Capitol Building, Judicial Wing, 1st Floor, Room 103, Bismarck, ND
Fax: 701-328-2979
Online: Apply online or upload documents at <https://cts.ndus.edu/tslf>

This form is to be completed by the school district superintendent or school principal ONLY!

I hereby certify that _____
(please PRINT the applicant's name)

is teaching under a **full-time 9-month employment contract** in (check the term or terms) **Fall 2016** _____ **Spring 2017** _____

at _____ in _____ in _____
(School Name) (City) (State)

Check the qualifying teaching shortage area that the applicant is requesting loan forgiveness for:

<input type="checkbox"/> Agriculture Education (2015-16, 2016-17) <input type="checkbox"/> Art (2015-16) <input type="checkbox"/> Business & Office Tech/Business Ed(2015-16) <input type="checkbox"/> Career Education (2015-16) <input type="checkbox"/> Computer Education (2015-16, 2016-17) <input type="checkbox"/> Driver & Traffic Safety Education (2016-17) <input type="checkbox"/> Economics & Free Enterprise System (2016-17) <input type="checkbox"/> Elementary Teacher (K-8) (2016-17) <input type="checkbox"/> English Language Arts (2015-16, 2016-17) <input type="checkbox"/> Family and Consumer Science (2015-16, 2016-17)	<input type="checkbox"/> Information Technology (2015-16) <input type="checkbox"/> Mathematics (2015-16, 2016-17) <input type="checkbox"/> Music (2016-17) <input type="checkbox"/> Physical Education (2015-16, 2016-17) <input type="checkbox"/> PK-12 Counselor (2016-17) <input type="checkbox"/> Science (2015-16, 2016-17) <input type="checkbox"/> Social Studies (2015-16, 2016-17) <input type="checkbox"/> Special Education (2015-16, 2016-17) <input type="checkbox"/> Technology Ed. (Industrial Arts) (2015-16) <input type="checkbox"/> _____ (other area applicant funded under in 2015-16)
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Signature and Certification of Superintendent or Principal:

_____ Printed Name & Title of Superintendent or Principal certifying this application	
_____ Signature of Superintendent or Principal	_____ Date
_____ Email address	_____ Phone number