



Department of
Higher Education



Grow Your Own Scholarship Program

District informational webinar

February 21, 2024

updated October 23, 2024

The Heart of Education

Grow Your Own Scholarship Program

Presenter: Krista Maxson, Ph.D.
Associate Vice Chancellor, P-16 Initiatives

Presentation outline

- I. Grow Your Own Program Purpose and Overview
- II. Statutory Authority & Requirements
- III. Scholarship Details
- IV. Nomination and Application Process
Walk-thru Portal (district, student, and employee)

- Please add your questions to the chat

Grow Your Own Scholarship Program Goals

- Assist school districts across Ohio recruit their own students and staff to become teachers within the district.
- Recipients of the Grow Your Own Scholarship agree to teach for a minimum of four years at their home school district in exchange for a scholarship of up to \$7,500/year for four years.

Timing and Funding Levels

Application opened February 5 → Deadline is March 29, 2024

Award notification → Mid-April 2024

Program start → Summer or fall 2024 term

Maximum award → \$7,500 per year for up to 4 years

Available funds → \$5 million in FY24 and \$10 million in FY25

Overview of process



**District nominates
candidate**

**Candidate completes
application**



**Committee reviews and makes
recommendation to
Chancellor**

Chancellor notifies awardees



**Student completes and
uploads a promissory note
with evidence of acceptance
into institution of higher
education.**

Student completes FAFSA



Statutory Authority and Requirements

- Qualifying schools defined in Ohio Revised Code Section 3333.393(A)(4)(a)(b)
- A qualifying school means:
 - A school district building identified as “high need” by the Chancellor and meeting both of the following conditions:
 - The school building has difficulty attracting and retaining classroom teachers who hold a valid educator license issued under section 3319.22 of the ORC.
 - The school is operated by the same school district from which the recipient of a scholarship graduated from high school or was employed.

Districts will be required to provide an explanation of their difficulty attracting and retaining classroom teachers. Description of this need must be provided on the application; we encourage uploading supporting documentation.

Statutory Authority and Requirements

- 3333.393(B)(1)(2) The following individuals are eligible to be nominated for the GYO Scholarship Program:
 - Individuals employed at a qualifying school who hold either an educational aide permit or educational paraprofessional license issued under section 3319.088 or a substitute license under section 3319.226
 - Low-income high school seniors

How is low-income defined?

- Low-income is defined as one of the following:
 - Any student that has an Expected Family Contribution (EFC) or Student Aid Index (SAI) of 10,000 or less. Please note, the only way to get this number is to complete the [Free Application for Federal Student Aid \(FAFSA\)](#). Districts are encouraged to assist their applicants in completing the FAFSA.
 - Any student that attends a high school that participates in the Community Eligibility provision for the National School Lunch and School Breakfast program, or a district with a district-wide identified student percentage (ISP) for the National School Lunch and School Breakfast program of 40% or higher. Your district will be asked to attest to its participation in these programs or ISP qualifications on the application.

Statutory Authority and Requirements

- 3333.393(G) states that if a GYO scholarship recipient does not complete the four-year teaching commitment within six years after graduating, the scholarship converts to a loan to be repaid.
- Under the law, the scholarship recipient must complete the four-year commitment at the nominating school district.

GYO Scholarship Details

- Scholarship funds will be disbursed directly to the institution for tuition and related expenses as included on the tuition bill.
- Awardee must make satisfactory academic progress as determined by the institution.
- Students must take a minimum of 12 credit hours each term and, while working, the employee must take a minimum of six credit hours to receive funding during the secondary school year.
- Funding is available for four years from the initial term of the scholarship program.

GYO Scholarship Details

- **Awardee must sign a promissory note each academic year** agreeing to a four-year teaching commitment at a qualifying school within six years after graduating from the teacher training program. Upon this fulfillment, the scholarship does not need to be repaid.
- **The scholarship converts to a loan that must be repaid** if the student fails to complete the four-year teaching commitment within six years after graduating from a teacher training program, or if the student drops out, is removed from, is not accepted into, or does not complete a teacher training program within six academic years.
- Awardee must complete the Free Application for Federal Student Aid (**FAFSA**) **each academic year** of participation.

Nomination and Application Process

[Grow Your Own Teacher Scholarship Program | The Ohio Department of Higher Education](#)

How to Apply:

The Ohio Grow Your Own Teacher Scholarship program is now accepting applications! District superintendents can set up their accounts by visiting the **Grow Your Own Teacher Scholarship Candidate and Administration Portal** at <https://growyourown.ohio.gov>. Once there, click on the “District” button in the top right corner of the screen to get started.

A preview of the applications is available here.

- [Student application](#)
- [Employee application](#)

Applications are due by **March 29, 2024**.

Grow Your Own Teacher Scholarship Program



LAUNCH 

Grow Your Own Teacher Scholarship | Candidate and
Administration Portal

For more information

- [Frequently Asked Questions](#)

Contact

Dr. Krista Maxson
Associate Vice Chancellor, P-16 Initiatives

Please direct any questions about this program to
GYO@highered.ohio.gov.

Overview

The Grow Your Own Teacher Scholarship Program is designed to help school districts across Ohio recruit their own students and staff to become teachers within the district. Recipients of the Grow Your Own Scholarship agree to teach for a minimum of four years at their home school district in exchange for a scholarship of up to \$7,500/year for four years.

Application periods will be set by the Ohio Department of Higher Education as funding is available. Leadership staff at [qualifying schools](#) are expected to pro-actively recruit their own students and employees to participate in this program. Each school district interested in participating in the Ohio GYO Teacher Scholarship Program must attest that it has difficulty recruiting and retaining qualified classroom teachers.



Grow Your Own Teacher Scholarship

Candidate and Administration Portal

More Information:

Frequently Asked Questions

Contact

Dr. Krista Maxson
Associate Vice Chancellor, P-16
Initiatives

Please direct any questions
about this program
to GYO@highered.ohio.gov.

Grow Your Own Teacher Scholarship Program

The Grow Your Own Teacher Scholarship Program is designed to help school districts across Ohio recruit their own students and staff to become teachers within the district. Recipients of the Grow Your Own Scholarship agree to teach for a minimum of four years at their home school district in exchange for a scholarship of up to \$7,500/year for four years.





Grow Your Own Teacher Scholarship

District Administrator Access

Set District Account Password

Please verify your identity by entering your school district IRN and your email address into the form below. Once your identity is verified, you will be able to set a new password for your account.

Enter District IRN & Email:

Submit

Cancel



Upon logging in, the superintendent sees the dashboard.

Click Edit to update the contact information for the superintendent, primary contact, and the HR contact. Confirmations, a statement of need, and a list of needed teaching certification areas must be completed.

Click on Assistant to name additional staff members who need access to the GYO portal.

Review candidates under the candidate button.

Warren Township Test SD - IRN: 888999
GYO ADMINISTRATOR
gyo@highered.ohio.gov

District Info

Assistant

Candidates

Candidates: 0
Apps Complete: 0
Apps Not Started: 0
Apps In Progress: 0

Logout

Warren Township Test SD - IRN #888999 - Allen County

Superintendent

Primary Contact

HR Contact

Confirmation of Need

✕

This school district confirms that the district has difficulty attracting and retaining classroom teachers who hold a valid educator license.

✕

This school district certifies that it intends to employ the applicant upon completion of the teacher preparation program and obtaining the identified teaching license.

Provide a statement that describes the need for teachers. Provide a list of all the buildings within your district that have trouble attracting and retaining teachers, or if this difficulty applies to all buildings, please state "all" buildings.

Statment has not been saved. Please select the Edit above to edit this statement and other district details.

Please list the teaching certification areas in which you have difficulty attracting and retaining classroom teachers who hold a valid educator license.

Mathematics grade 4 level a-c. Social emotional learning certifications

Uploaded District Files/Documents

No files have been uploaded

When editing, contact information must be entered for the superintendent, primary contact, and HR contact.

The district must provide a statement of need and specify which areas certification are needed to fill positions.

Districts may submit additional files to support the difficulty in attracting teachers.

Superintendent may assign an assistant to complete.

Warren Township Test SD - IRN: 888999
GYO ADMINISTRATOR
gyo@highered.ohio.gov

District Info

Assistant

Candidates

Candidates: 0

Apps Complete: 0

Apps Not Started: 0

Apps In Progress: 0

Logout

Warren Township Test SD - IRN #888999 - Allen County

Save

Close

Superintendent	Primary Contact	HR Contact
<div>Superintendent First Name</div>	<div>Primary Contact First Name</div>	<div>HR Contact First Name</div>
<div>Superintendent Last Name</div>	<div>Primary Contact Last Name</div>	<div>HR Contact Last Name</div>
<div>Superintendent Email</div>	<div>Primary Contact Email</div>	<div>HR Contact Email</div>
<div>Superintendent Phone</div>	<div>Primary Contact Phone</div>	<div>HR Contact Phone</div>

Statement of Need

Provide a statement that describes the need for teachers. Provide a list of all the buildings within your district that have trouble attracting and retaining teachers, or if this difficulty applies to all buildings, please state "all" buildings.

Specific District Needs

Please list the teaching certification areas in which you have difficulty attracting and retaining classroom teachers who hold a valid educator license.

Mathematics grade 4 level a-c. Social emotional learning certifications

☐

By signing below the school district confirms that the district has difficulty attracting and retaining classroom teachers who hold a valid educator license.


☐

By signing below the school district certifies that it intends to employ the applicant upon completion of the teacher preparation program and obtaining the identified teaching license.

File Uploads:

Select

Upload

 Department of
Higher Education

HigherEd.Ohio.gov

Selected staff members will receive an email letting them know they have been invited. The email includes the link to the portal for them to set their password and login information.

Superintendents can add or delete staff as needed.

Warren Township Test SD - IRN: 888999

GYO ADMINISTRATOR

gyo@highered.ohio.gov

District Info

Assistant

Candidates

Candidates: 0

Apps Complete: 0

Apps Not Started: 0

Apps In Progress: 0

Logout

Assistant List | 2 Enabled 1 Disabled

Add

ADMINISTRATOR, GYO

gyo@highered.ohio.gov

Superintendent

Enabled - Last Login February 14, 2024

Delete

Edit

Balbaugh, Melissa

melissa.balbaugh@mcoecn.org

Superintendent

Disabled - Last Login

Undelete

Edit

Ridinger, Mike

ridinger@infohio.org

Administrator

Enabled - Last Login February 6, 2024

Delete

Edit

Clicking the candidate button, GYO superintendents and staff can nominate, remove, or send notices to the candidates.

Warren Township Test SD - IRN:
888999
GYO ADMINISTRATOR
gyo@highered.ohio.gov

District Info

Assistant

Candidates

Candidates:0

Apps Complete:0

Apps Not Started:0

Apps In Progress:0

Logout

Candidate List

Nominate/Add

No candidates have been nominated at this time

The nomination must include the candidate's name, address, email, phone number, and date of birth.

The candidate must be identified as an employed applicant or a student.

The district must also provide a statement describing the applicant and what makes the applicant a good candidate.

The district staff must check the box to send the email notification to the candidate.

Warren Township Test SD - IRN: 888999
GYO ADMINISTRATOR
gyo@highered.ohio.gov

District Info

Assistant

Candidates

Candidates: 0
Apps Complete: 0
Apps Not Started: 0
Apps In Progress: 0

Logout

Nominate Candidate

Save Save & Close Cancel

Use this form to create a candidate record. This form is also used to send the candidate an invite to the Grow Your Own scholarship program. Please be sure to include a valid email address, and check (or uncheck) the send invitation button as needed.

District: Warren Township Test SD

Candidate Name: First Name Last Name

Candidate Address: Street Address

City OH Zip

Candidate Email: Email Address

Candidate Phone: ###-###-####

Candidate DOB: mm/dd/yyyy

Employed or Student? Make Selection

Make Selection
Employed Applicant
Student Applicant

Attach a brief statement describing the applicant and what makes the applicant a good candidate. Please specifically discuss applicant's academic qualifications.

Check this box to send email notification to candidate

☐ By submitting this invitation, the school district confirms that the district has difficulty attracting and retaining classroom teachers who hold a valid educator license.

☐ By submitting this invitation, the school district certifies that it intends to employ the applicant upon completion of the teacher preparation program and obtaining the identified teaching license.

Select Save or Cancel above. Please Note: Checking the Email Invite box will send an email notification to this individual. Saving this record multiple times with the box checked will send multiple invitations, so please be careful when using this option.

Student nominations allow the district to indicate the student meets the low-income standard by attesting the high school where the student attends participates in the Community Eligibility provision for the National School Lunch and Breakfast Program, or the district has a 40% or higher rate of identified student percentage (ISP) for the National School Lunch and School Breakfast program.

Please note, “No” is shown as a default.

Attach a brief statement describing the applicant, and why you believe the applicant will be a successful participant in the Grow Your Own Teacher Scholarship Program. Please specifically discuss applicant's academic qualifications.

Statement indicating why student would be a good candidate.

Only low-income high school seniors are eligible. One of the definitions for low income is the following:

Any student that attends a high school that participates in the Community Eligibility provision for the National School Lunch and School Breakfast program or a district with a district-wide identified student percentage (ISP) for the National School Lunch and School Breakfast program of 40% or higher. Does the student applicant meet the definition of low-income based on your school/district participation in this program?

Does the student applicant meet the definition of low-income based on your school/district participation in this program?

☐ YES ☒ NO

☐ Check this box to send email notification to candidate

☐ By submitting this invitation, the school district confirms that the district has difficulty attracting and retaining classroom teachers who hold a valid educator license.

☐ By submitting this invitation, the school district certifies that it intends to employ the applicant upon completion of the teacher preparation program and obtaining the identified teaching license.

Select Save or Cancel above. Please Note: Checking the Email Invite box will send an email notification to this individual. Saving this record multiple times with the box checked will send multiple invitations, so please be careful when using this option.

Districts can check the application status for candidates, delete a candidate, edit the candidate nomination, and send email messages to those who have not completed the application.

Warren Township Test SD - IRN:
888999
GYO ADMINISTRATOR
gyo@highered.ohio.gov

District Info

Assistant

Candidates

Candidates:2

Apps Complete:1

Apps Not Started:1

Apps In Progress:0

Logout

Candidate List

Nominate/Add

Employee, Suzy

Delete

Application

Edit

Email: suzyemployee@noemail.com

Phone: 555-555-4444

DOB: 1990-08-01

Type: Employed

App Status: Complete

Email: suzyemployee@noemail.com

Phone: 555-555-4444

DOB: 1990-08-01

Type: Employed

Student, Tommy

Delete

Application

Edit

Email: tommystudent@noemail.com

Phone: 555-555-3333

DOB: 2006-05-05

Type: Student

App Status: Not Started

Email: tommystudent@noemail.com

Phone: 555-555-3333

DOB: 2006-05-05

Type: Student

GYO student portal



Students can access their application through the link that is emailed to them upon nomination.

Contact information will be completed by the district but may be updated by the student.

GROW YOUR OWN TEACHER SCHOLARSHIP APPLICATION [Student Applicant]

Application last updated February 14, 2024

App Status: Incomplete

SaveLogout

Please complete the following application. The App Status button at the top-left of this application will appear Green and will say "Complete" when your application is ready for review. You do not need to complete the application in one sitting. Please make sure to select Save if you make any changes. You may return to this site at any time to finish your application. If you have any questions, please email gyo@highered.ohio.gov.

Contact Information:

Name:

TommyStudent

Email:

tommystudent@noemail.com

Address:

9955 South Street

City:

AnyTown

State/Zip:

OH43235

Phone:

555-555-3333

Date of Birth:

05/05/2006

Students will identify which high school they attended, their graduation year, and any college credits earned while in high school.

NOTE: Students currently enrolled in College Credit Plus courses may include credits for courses in which they are enrolled in the spring semester.

Education Information:

High School Attended:

Warren Township Test SD

Expected HS Grad Year:

2024

Any College Credits?

☐ YES

☒ NO

Credits

If YES, now many credits did you earn?

Students will identify their teaching area of interest. The school district has identified areas of need, which are displayed in red.

Students must identify which educator preparatory program they plan to attend, if they intend to begin at a community college, and what semester they intend to start.

Students must include a statement of why they would like to become a teacher.

Teacher Specifications:

Areas of Interest:

Teaching areas of interest. District needs: Mathematics grade 4 level a-c. Social emotion

School district needs: Mathematics grade 4 level a-c. Social emotional learning certifications

Institution:

Select the institution where you intend to complete your teacher preparation program.

What college/institution will you be attending?

Have you been accepted?

☐ YES ☒ NO

Community College?

Do you intend to start at a community college and transfer to an institution with a teacher preparation program? If yes, what community college do you plan to attend?

I do not plan to attend a community college.

Funding Start:

Select Semester

YYYY

Why be a Teacher?

Brief statement (500 words or less) on why you would like to be a teacher.

Students must acknowledge program requirements prior to submitting.

Please confirm need:

The Grow Your Own Teacher College Scholarship program is for low-income high school seniors. You may qualify as low-income based on the high school you attend. Otherwise, ODHE will determine your low-income status through your college or university after you have completed the Free Application for Federal Student Aid (FAFSA). If your Student Aid Index (SAI) as determined by the FAFSA is 10,000 or less, you may be eligible for this program. For additional information, visit <https://highered.ohio.gov/grow-your-own>.

Please confirm the following:

I will file a statement of service status in compliance with section 3345.32 of the ORC, if applicable. This is required before any payments can be made pursuant to the Ohio Grow Your Own Teacher Scholarship Program. See <https://www.sss.gov/verify/proof/> for more information.

☒ TRUE ☐ FALSE

I have not plead guilty to, been convicted of, or adjudicated a delinquent child for any violation listed in section 3333.38 of the ORC

☒ TRUE ☐ FALSE

I will file a statement of service status in compliance with section 3345.32 of the ORC, if applicable. This is required before any payments can be made pursuant to the Ohio Grow Your Own Teacher Scholarship Program. See <https://www.sss.gov/verify/proof/> for more information.

☒ TRUE ☐ FALSE

I understand that I must complete the **FAFSA** within thirty (30) days of receiving my acceptance letter in order to receive a GYO Teacher scholarship.

Please select Save at the top of this application to save your changes. You may come back to your application later if you are unable to complete the entire application at this time.

If there are any missing required items, the application will have a status of “In Progress.”

Clicking on the status button will show the missing items.

The application status will show as “complete” when all required fields have been populated.

Students can return to their application and update their information, even after the application is complete.

App Status: In Progress 4 notes

SaveLogout

Please complete the following application. The App Status button at the top-left of this application will appear Green and will say "Complete" when your application is ready for review. You do not need to complete the application in one sitting. Please make sure to select Save if you make any changes. You may return to this site at any time to finish your application. If you have any questions, please email gyo@highered.ohio.gov.

- Please enter your teaching areas of interest
- Please select funding start year.
- Please enter the funding start year.
- Please explain why you wish to be a teacher.

App Status: complete

SaveLogout

GYO employee portal



App Status: Incomplete

Save

Logout

Please complete the following application. The App Status button at the top-left of this application will appear Green and will say "Complete" when your application is ready for review. You do not need to complete the application in one sitting. Please make sure to select Save if you make any changes. You may return to this site at any time to finish your application. If you have any questions, please email gyo@highered.ohio.gov.

Contact Information:

Name:

Suzy

Employee

Email:

suzyemployee@noemail.com

Address:

12345 Any Street

City:

AnyTown

State/Zip:

OH

43235

Phone:

555-555-4444

Date of Birth:

08/01/1990



Employees can access their application through the link that is emailed to them upon nomination.

Contact information will be completed by the district but may be updated by the employee.

If a candidate is employed by an ESC, the district of employment will be the district that completes the nomination.

Employment Information:

Employed at ESC:	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
District of Employment:	Warren Township Test SD
Current Position Title:	Long Term Substitute
Educator State ID:	<div>TU123456789</div> <div>Paraprofessional ▾</div>
	Lookup your certification/licensure
Date License/Permit Received:	<div>08/01/2023</div> <div>📅</div>

Candidates must include high school graduation information and any postsecondary information.

If you have attended multiple institutions, list all in the “institution attended” field, separated by semicolons.

Include credits earned at all institutions.

Education Information:

HS Diploma or Equivalent:



YES



NO

Graduation Year:

2008

Postsecondary degree/credits?



YES



NO

Institution Attended:

Institution Attended

Degree

Degree

Major

Major

If no degree, credits earned:

Credits

Candidates will identify their teaching area of interest. The school district has identified areas of need, which are displayed in red.

Candidates must identify which educator preparatory program they plan to attend, if they intend to begin at a community college, and what semester they intend to start.

Candidates must include a statement of why they would like to become a teacher.

Candidates can link to a resume or upload a resume.

Teacher Specifications:

Areas of Interest:

Mathematics

School district needs: Mathematics grade 4 level a-c. Social emotional learning certifications

Planning to Attend:

Institution where you intend to complete your teacher preparation program.

Bluffton University

Have you been accepted?

☒ YES ☐ NO

Community College?

Do you intend to start at a community college and transfer to an institution with a teacher preparation program? If yes, what community college do you plan to attend?

I do not plan to attend a community college.

Funding Start:

Fall 2024

Expected Program Completion:

05 2028


Why become a teacher?

In 500 words or less, explain why you want to become a teacher.


Resume:

Resume Link

Resume Doc/File:

 View Your Resume



 Replace Resume

Candidates must acknowledge program requirements prior to submitting their application.

Please confirm the following:

I will file a statement of service status in compliance with section 3345.32 of the ORC, if applicable. This is required before any payments can be made pursuant to the Ohio Grow Your Own Teacher Scholarship Program. See <https://www.sss.gov/verify/proof/> for more information.

☒ TRUE ☐ FALSE

I have not plead guilty to, been convicted of, or adjudicated a delinquent child for any violation listed in section 3333.38 of the ORC

☒ TRUE ☐ FALSE

I will file a statement of service status in compliance with section 3345.32 of the ORC, if applicable. This is required before any payments can be made pursuant to the Ohio Grow Your Own Teacher Scholarship Program. See <https://www.sss.gov/verify/proof/> for more information.

☒ TRUE ☐ FALSE

I understand that I must complete the **FAFSA** within thirty (30) days of receiving my acceptance letter in order to receive a GYO Teacher scholarship.

Please select Save at the top of this application to save your changes. You may come back to your application later if you are unable to complete the entire application at this time.

By submitting this application, I confirm that all the information provided is true and accurate, that I want to participate in the Grow Your Own Teacher Scholarship Program, and that I understand the requirements of the program including the requirement to work for four years at my school within six years of graduating from a teacher preparation program.

If any required items are missing, the application will have a status of “In Progress.”

Clicking on the status button will show the missing items.

The application status will show as “complete” when all required fields have been populated.

Candidates can return to their application and update their information, even after the application is complete.

App Status: In Progress 4 notes

SaveLogout

Please complete the following application. The App Status button at the top-left of this application will appear Green and will say "Complete" when your application is ready for review. You do not need to complete the application in one sitting. Please make sure to select Save if you make any changes. You may return to this site at any time to finish your application. If you have any questions, please email gyo@highered.ohio.gov.

- Please enter your teaching areas of interest
- Please select funding start year.
- Please enter the funding start year.
- Please explain why you wish to be a teacher.

App Status: complete

SaveLogout

Thank you for attending.

Please forward any additional questions to GYO@highered.ohio.gov



**Department of
Higher Education**

25 South Front St.
Columbus, Ohio 43215 U.S.A.

614 | 466-6000
highered.ohio.gov