

**LOUISIANA TECH UNIVERSITY PERKINS LOAN DEPARTMENT  
CHANGE OF ADDRESS FORM**

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Street Address)  
\_\_\_\_\_  
(City) (State) (Zip)

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cell Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

Return this completed form to the Perkins Loan Department

In Person:  
Room 237, Keeny Hall

By Mail:  
Perkins Loan Department  
Office of the Comptroller  
P.O. Box 7924  
Ruston, LA 71272

By Fax:  
Attn: Perkins Loan Department  
(318) 257-2033

By Email attachment:  
Perkins@latech.edu