

LOUISIANA TECH UNIVERSITY Office of Financial Aid

Please return this completed form to: Louisiana Tech University

Office of Financial Aid PO Box 7925 Ruston, LA 71272

Request for Confirmation of Financial Aid 2022-2023

- This form is used when a student is applying for aid other than federal financial aid and the application required for consideration for that aid must have financial aid status or funding information.
- This is not an application for consideration of aid that is awarded by the Louisiana Tech University Office of Financial Aid.
- Include any forms or information with your request that will help us complete your request accurately and in a timely maner.

STUDENT'S Last Name	First Name	MI	STUDENT'S CWID or SSN
STUDENT'S Mailing Address (include Apt. No.)			STUDENT'S Date of Birth (MM/DD/YYYY)
City	State	Zip Code	STUDENT'S Home Phone (Include area code)
STUDENT'S Email Address			STUDENT'S Cell Phone (Include area code)

DIRECTIONS: Please complete the information below to indicate why you are requesting confirmation of aid.

Louisiana Department of Children and Family Services (choose all that apply):

Child Care Assistance Program (CCAP)

Family Independence Temporary Assistance Program (FITAP)

Kinship Care Subsidy Program (KCSP)

Supplemental Nutrition Assistance Program (SNAP) (formerly the Food Stamp Program)

GMAT Fee Waiver Request - Student MUST have applied for Grad School in Business (current La Tech students only), have a completed Financial Aid File which includes FAFSA and all documents, and have remaining financial need.

Department: Approved Denied Office of Financial Aid: Approved Denied

Signature: Signature:

PRAXIS Fee Waiver Request - Attach the Fee Waiver Request form with all necessary information completed

Choose One: Paper Delivered Fee Waiver Request Computer Delivered Fee Waiver Request

Choose One: Admission to Teacher Education Program Initial Teacher Certification

Scholarship - Information is needed regarding my financial aid for a scholarship application. I have attached any forms that might be needed to process this request.

Scholarship Name:

Other Request - Include name, description, or reason for request below.

Requesting Entity Deadline:

Confirmations will be available to pick up in three to four working days. Please complete the following:

I will pick up (This information will be destroyed if not picked up within one month from date of request)

Email Request (Please provide a name and address of where request is to be sent)

Please mail this information to:

Mailing Address (include Apt. No.)

City State Zip