



LOUISIANA TECH UNIVERSITY
Office of Financial Aid
Request for Change of Access Code

Please return this completed form to:
Louisiana Tech University
Office of Financial Aid
PO Box 7925 Ruston, LA 71272

STUDENT'S Last Name

First Name

MI

STUDENT'S CWID or SSN

If you KNOW your current Access Authorization code, please complete Section A, sign and date below and submit this request form to the address above.

Access Code Change:

1. My Current Code is: _____
2. Change Code to: _____

If you have misplaced your Access Authorization Code and are requesting a new code, you should:

1. Complete item #2 above to indicate a new code.
2. Sign and date below.
3. Submit this form AND a copy of your social security card or driver's license to the email address above. We will not make changes to your access code without the additional documentation.

Student Signature:

Date: