



# LOUISIANA TECH UNIVERSITY

## Office of Financial Aid

### Verification Worksheet Parent's Signature Page 2026-2027

Please return this completed form to:

Louisiana Tech University

Office of Financial Aid

PO Box 7925 Ruston, LA 71272

#### Certifications and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct.

The Student and ONE parent whose information was reported on the FAFSA must sign and data.

**WARNING:** If you purposely give false or misleading information, you may be fined, be sentenced to jail, or both.

STUDENT'S Last Name

First Name

MI

STUDENT'S CWID or SSN

PARENT'S Last Name

First Name

MI

Student Signature:

Electronically signed by Student on NetPartner

Parent Signature:

Date: