

# PERKINS LOAN INFORMATION SHEET

The information on this form will not be used to determine your financial eligibility for this loan. This form must be completed in its entirety and returned to the Perkins Loan Collection Office. (PLEASE PRINT)

Student's Name \_\_\_\_\_  
Birth Date \_\_\_\_\_  
Email Address #1 \_\_\_\_\_

LSU ID \_\_\_\_\_  
Driver's License Nbr/State \_\_\_\_\_  
Email Address #2 \_\_\_\_\_

## PERMANENT ADDRESS

Street \_\_\_\_\_  
City/State \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone # \_\_\_\_\_

## LOCAL ADDRESS

Street \_\_\_\_\_  
City/State \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone # \_\_\_\_\_

EMPLOYER: \_\_\_\_\_  
(Company Name and Street Address)

Father's Name \_\_\_\_\_  
Street \_\_\_\_\_  
City/State \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone # \_\_\_\_\_

Mother's Name \_\_\_\_\_  
Street \_\_\_\_\_  
City/State \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone # \_\_\_\_\_

Grandparent's Name \_\_\_\_\_  
Street \_\_\_\_\_  
City/State \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone # \_\_\_\_\_

Your Spouse's Name \_\_\_\_\_  
Spouse Employment \_\_\_\_\_  
Spouse's Parent's Name \_\_\_\_\_  
Street \_\_\_\_\_  
City/State \_\_\_\_\_  
Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

## SIBLINGS OVER 18 NOT LIVING AT HOME

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City/State \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone # \_\_\_\_\_

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City/State \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone # \_\_\_\_\_

## PERSONAL REFERENCES: (Neighbor, Relative, Pastor)

Name \_\_\_\_\_  
Name \_\_\_\_\_

Address: \_\_\_\_\_  
Address: \_\_\_\_\_

THE ABOVE INFORMATION IS CORRECT AND COMPLETE, AND I HEREBY AUTHORIZE VERIFICATION AS REQUIRED BY LSU.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date