

College Connect Locations

SUNO Campus:

Barnes Administration Bldg., Room A-43
Phone: 225-771-2208
Fax: 225-771-2208
Email: financialaid@susla.edu

SUBR Campus:

Stewart Hall, Rm 107
Phone: 225-771-5630
Fax: 225-771-4954
Email: financialaid@susla.edu



Office of Student Financial Aid & Scholarships

L.C. Barnes Administration Bldg., Room A-43
3050 Martin Luther King, Jr Dr.
Shreveport, LA 71107

Phone: (318) 670-9221 • Fax: (318) 670-6313 • Email: financialaid@susla.edu

2018-2019 Legal Guardianship Certification

Student ID # _____			
Student's Social Security Number _____	Student's Last Name ^e _____	Student's First Name _____	Middle Initial _____
Street Address _____	City _____	State _____	Zip Code _____
Home Telephone Number _____		Cell Phone Number _____	

The U.S. Department of Education requires documentation to be submitted to the Office of Student Financial Aid & Scholarships in order for the Director to determine if the circumstances warrant a legal guardianship status . The Director's decision is FINAL. Legal Guardianship situations are done on a case-by-case basis. Even if you were eligible for a legal guardianship status in a previous academic year or at a previously-attended institution, you may not qualify for this status in the future.

Please Check:

- A. I have provided additional information concerning my legal guardianship status.**
- B. I attest my situation, as it relates to my legal guardianship status, has not change from the information provided the previous award year.**

I certify that the information provided on this form is true and correct. I also understand that it will be used to override federal regulations regarding my legal guardianship status.

I fully understand that to falsify any information on this form in order to receive Federal Title IV funds is a federal offense and can be punishable by a \$10,000 fine, imprisonment, or both.

Student Signature: _____

Date: _____