



LOUISIANA
CHRISTIAN
UNIVERSITY

ADDITIONAL LOAN APPLICATION

Student ID#: _____ Name: _____

Permanent Address: _____

Local Address: _____

Home Phone: (____) _____ Cell: (____) _____

DOB: ____/____/____ Anticipated Date of Graduation: ____/____

U.S. Citizen: ____ Yes ____ No E-mail: _____

Total requested loan amount: \$ _____

Subsidized and Unsubsidized amounts will be determined by Financial Aid Counselor based on eligibility. All loans are subject to processing fees of up to 1.057 - 4.228% of the loan total.

Requested loan period:

Fall: _____ Spring: _____ Summer: _____

LCU participates in electronic transfer (ETF) of loan proceeds. I authorize the school to transfer loan proceeds received by EFT to my student account.

Student Signature: _____ **Date:** ____/____/____

Last 4 of Social Security Number: _____