



Louisiana Christian University

Office of Financial Aid

1140 College Drive | LC Box 582 | Pineville, LA 71359

Phone: (318) 487-7386 | Email: financial.aid@lcuniversity.edu

2026–2027 Dependent V4 Verification Worksheet

Federal regulations require students selected for Verification Group V4 to confirm their identity and educational purpose. This worksheet must be completed and returned to the Louisiana Christian University Financial Aid Office along with any required supporting documentation.

1. Student Information

Full Name	LCU ID	Date of Birth
Phone	Email	

2. High School Completion Status

High school diploma Final transcript GED Homeschool Equivalent documentation
Attach one of the acceptable documents verifying high school completion.

3. Identity and Statement of Educational Purpose

Option 1 – In-Person Verification: Student must appear at LCU and present a valid government-issued photo ID (such as driver's license, passport, or state ID) and sign below in the presence of a Financial Aid Officer.

Option 2 – Virtual / Notary Verification: If unable to appear in person, the student may verify via live video conference or by notarized statement below.

Statement of Educational Purpose:

I certify that I, _____, am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Louisiana Christian University for the 2026–2027 academic year.

Student Signature: _____ Date: _____

FA Officer Signature (if in-person or virtual): _____ Date: _____

Notary Section (if applicable): State: _____ County: _____ Notary: _____

Commission Expires: _____ (Seal)

4. Certification and Signatures

Each person signing below certifies that all information reported is complete and correct.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

5. For Office Use Only

Identity verified Educational Purpose verified HS completion verified Conflicts resolved
Verified by: _____ Date: _____

Return completed form to the Louisiana Christian University Financial Aid Office.