

318.797.5061 (Fax) 318.797.5286 One University Place Shreveport, LA 71115-2399

Request for Letter of Non-Attendance

Name:
Date of Birth:
Last four of SSAN:
Please mail document to:
Please fax document to:
Please e-mail document to:
Sign here (must be handwritten signature) to authorize the release of your information to a third party:
Please e-mail completed form to registrar@lsus.edu. Please allow two business days for processing.
Should we discover that you do have an LSU Shreveport transcript on file, we will notify you to have that transcript sent via Parchment.

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