Office of Enrollment Management

2020-2021 ACTIVE DUTY CERTIFICATION STATEMENT

Student's Name: _____ LSU ID: 89 - _____ - _____

Please use only blue or black ink when completing this document.

□ Yes □ No Are you currently serving in the United States Armed Forces or are a National Guard or Reserves enlistee who is on active duty for other than state or training purposes?

□ Yes □ No Are you a National Guard or reserves enlistee who is on active duty for state or training purposes?

By signing this statement, I certify that all information on this form is complete and correct. ***If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

Note: ***Electronic signatures will not be accepted.***

Student's Signature: _____ Date: _____