By providing your cell phone number, you agree to receive text-based communication on your mobile phone from the Louisiana Office of Student Financial Assistance (LOSFA), LFOS, and our university partners. Your information will be kept confidential and will not be shared with institutions other than those to which you have indicated interest. Standard text-messaging rates apply and you are responsible for any costs incurred in receiving texts. You may also opt-out at any time by replying to any text sent.

School Name: ___________________________  Student Name: ___________________________

Cell Phone Number: (       ) _______ - ____________

__________________________________________________________

By providing your cell phone number, you agree to receive text-based communication on your mobile phone from the Louisiana Office of Student Financial Assistance (LOSFA), LFOS, and our university partners. Your information will be kept confidential and will not be shared with institutions other than those to which you have indicated interest. Standard text-messaging rates apply and you are responsible for any costs incurred in receiving texts. You may also opt-out at any time by replying to any text sent.

School Name: ___________________________  Student Name: ___________________________

Cell Phone Number: (       ) _______ - ____________

__________________________________________________________

By providing your cell phone number, you agree to receive text-based communication on your mobile phone from the Louisiana Office of Student Financial Assistance (LOSFA), LFOS, and our university partners. Your information will be kept confidential and will not be shared with institutions other than those to which you have indicated interest. Standard text-messaging rates apply and you are responsible for any costs incurred in receiving texts. You may also opt-out at any time by replying to any text sent.

School Name: ___________________________  Student Name: ___________________________

Cell Phone Number: (       ) _______ - ____________

__________________________________________________________

By providing your cell phone number, you agree to receive text-based communication on your mobile phone from the Louisiana Office of Student Financial Assistance (LOSFA), LFOS, and our university partners. Your information will be kept confidential and will not be shared with institutions other than those to which you have indicated interest. Standard text-messaging rates apply and you are responsible for any costs incurred in receiving texts. You may also opt-out at any time by replying to any text sent.

School Name: ___________________________  Student Name: ___________________________

Cell Phone Number: (       ) _______ - ____________

__________________________________________________________