The decision whether to do business electronically with the LSU Health Shreveport is yours. By signing the LSU Health Shreveport Student Administration Electronic Consent Form, you consent to allow LSU Health Shreveport to conduct business electronically including having communications provided or made available to you in electronic form and entering into Agreements and Transactions using electronic records and signatures. Your consent is valid until you revoke your consent. Categories of records to be provided electronically may include, but are not limited to: registration documents, admission documents, financial aid documents, student account documents, receipt of consumer information about LSU Health Shreveport, any disclosure, consent, waiver, release, and notice or payment reminder that would normally be delivered in writing that may be required by law or regulation.

1. Only the person whose LSU Health Shreveport Student ID was used to enter the PeopleSoft Student Self-Service Portal may conduct business in that database. Any other use is considered a serious violation of LSU Health Shreveport policy.
2. You must also keep your contact information up-to-date. To update your name, address, or email address, log into the PeopleSoft Self-Service student portal.
3. LSU Health Shreveport reserves the right to provide records in paper format at any time. By consenting to electronically conduct business, however, you agree that LSU Health Shreveport is not required to provide you with records in paper format. If you want to retain a paper copy of any records provided electronically, you should print a copy from the computer.
4. You may withdraw your consent to electronically conduct business at any time. However, if you withdraw consent, any Agreements or Transactions between you and LSU Health Shreveport during the period after your consent to do business electronically, and before your withdrawal of consent, will be valid and binding on all parties. To withdraw consent, contact the Registrar's Office which will confirm the effective date of your withdrawal.
5. If you do not agree with these items, do not sign this form. You will receive paper communications and will not be able to use the PeopleSoft Student Self-Service Portal to conduct business electronically with LSU Health Shreveport. This includes not being able to access accounts and information online. To proceed or obtain more information about conducting business in a non-electronic medium, you must contact the Office of the Registrar, Bursar’s Office, and the Student Financial Aid Office.

BY SIGNING AND SUBMITTING THIS FORM, YOU ACKNOWLEDGE THAT YOU HAVE READ THE INFORMATION ABOUT CONDUCTING BUSINESS WITH THE UNIVERSITY USING ELECTRONIC METHODS AND HAVE EITHER CONSULTED WITH OR HAD SUFFICIENT OPPORTUNITY TO CONSULT WITH ADVISORS OF YOUR CHOICE ON THE MEANING AND IMPLICATIONS OF THIS CONSENT. YOU AGREE THAT THE UNIVERSITY MAY PROVIDE YOU WITH THE ABOVE-LISTED CATEGORIES OF RECORDS IN ELECTRONIC FORMAT AND YOU CONSENT TO ELECTRONICALLY ENTER INTO TRANSACTIONS RELATED TO THOSE RECORDS.

_______________________________________  ______________________________________
Printed Name                                     Signature (in ink)

Date: _________________________________________________________________________

Office Use Only

Student ID:__________  Academic Plan:_________________________  EGT: _________
Other:___________________________