

**Light Christian University**  
1110 24th Ave SW - Austin, MN 55912  
Telephone: (888) 353-6013 - Email: [info@lcuedu.com](mailto:info@lcuedu.com)

**Correspondence Course Study**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Email: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Course Title and Number Reason for externally directed course:

Certificate/Diploma \_\_\_\_\_ Undergraduate \_\_\_\_\_ Graduate \_\_\_\_\_ other \_\_\_\_\_

Date course is to be started \_\_\_\_\_ Date course work to be completed: \_\_\_\_\_

Amount attached to cover tuition: \$ \_\_\_\_\_ Amount paid by check \_\_\_\_\_ Check # \_\_\_\_\_  
or cash \$ \_\_\_\_\_

**Additional student comments:**

\_\_\_\_\_  
\_\_\_\_\_

**INFORMATION BELOW THIS LINE FOR OFFICE USE ONLY**

Request received by: \_\_\_\_\_

Request approved by: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_ Received by: \_\_\_\_\_

Date materials were sent to or picked up by student: \_\_\_\_\_

Date course requirements were met: \_\_\_\_\_ Final course grade: \_\_\_\_\_

Final course grade issued by: \_\_\_\_\_ Date Home Office notified: \_\_\_\_\_

Additional advisor comments: \_\_\_\_\_

\_\_\_\_\_  
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