

Andrews  University
Counseling and Testing Center

GED REGISTRATION FORM

Paid: _____

Date: _____

Military: Yes No Previously Taken GED: Yes No Home Schooled: Yes No

Please present your picture ID and \$155.00 cash to the test administrator.
 Each GED retake test is \$35. Please provide all Information Requested. Thank You!

Name: _____ Last Grade Completed: _____

Address: _____ Year Former Class Graduated: _____

(City) _____ (Zip) _____

Phone #: _____ - _____ - _____ Email: _____

SSN#: _____ - _____ - _____ Date of Birth: ____/____/____ Age at time of Test: _____

High School Attended: _____ Address: _____
 (City) _____ (ST) _____ (Zip) _____

I understand that GED testing fees are non-refundable. No exceptions are made! First transcript is **FREE**. All transcript requests must be submitted with a transcript request form.

I hereby authorize the Counseling and Testing Staff to release test scores to: _____

In signing, I release the GED Testing program, its employees, its attorneys, its governing bodies, and its agents from any and all liability and claims of every kind and character that are based upon or relate in any way to the disclosure of information in accordance with this authorization, of any actions of the third part identified above.

Examinee Signature: _____ **Date:** _____

Witness: _____ **Date:** _____

-----Below this line for office use only-----

DATE	Format CODE	TEST	Form CODE	RETAKE Date	Form CODE	RETAKE Date	Form CODE
	EP	Language Arts (75 min)					
		Essay (45 min)					
	EP	Reading (65 min)					
	EP	Science (80 min)					
	EP	Social Studies (70 min)					
	EP	Math I (45 min)					
		Math II (45 min) No Calc.					
					Amt. Pd:		Amt. Pd:

_____ **Photo ID verified** _____ **Eligibility verified** _____ **Waiver** _____ **Demographic**

(see reverse)

First Transcript: YES Date Received: _____ Status: Pass Non Pass

L-5 Verification of Eligibility

To take the GED tests

Candidate Information

Date: ____/____/____
mm dd yyyy

If the information provided on this form is found to be incorrect, the Official GED Testing Center’s Examiner can refuse to administer or score the GED Tests and this jurisdiction can refuse to issue a score report or high school credential based on your test results.

I, _____, hereby affirm that:

- (1) I have not graduated from an accredited high school in the United States or Canada, nor am I currently enrolled in High School.

Last High School Attended: _____

City: _____ State: _____

- (2) I have not received a high school diploma from any jurisdiction.
- (3) I have not previously earned GED scores sufficient to qualify for a high school credential in any jurisdiction. *If you need to earn higher scores to qualify for advanced education or employment, you may, with appropriate verification from the institution or employer, qualify for a test. Contact the GED Examiner for information on how to proceed.*
- (4) I am at least 16 years old as of today. Birth date: ____/____/____
mm dd yyyy

- (5) I hereby acknowledge that GED Testing Services regulations prohibit taking and of the GED Tests more than three times during any calendar year (January 1 – December 31). I affirm/certify that I have not already taken the GED Tests more than twice during this year regardless of where I have taken the GED Tests.
- (6) I understand that scores on any GED Tests taken more than three times during a year may be invalidated, and that if I violate this rule, I may be subject to an additional waiting period before being allowed to take the GED Tests again.
- (7) I am a resident of this jurisdiction and currently reside at the following address:

Address: _____ City: _____

State: _____ ZIP/Postal Code: _____

- (8) I meet the additional jurisdictional requirements listed below:

TEST MISCONDUCT/ENVIRONMENT DISCLAIMER

The GED Testing Service in Washington, DC requires strict enforcement of testing standards. GED test scores will be invalidated and my GED Certificate will be denied or revoked for the following misconduct:

- ✓ I understand that if I fraudulently identify myself as the person taking the GED test that I and the person who is supposed to be testing will be subject to all criminal laws that apply.
- ✓ Presenting false identification
- ✓ Impersonating someone else
- ✓ Talking during the test
- ✓ Copying from another examinee
- ✓ Receiving test questions or answers in advance.
- ✓ Removing or attempting to remove any part of the test from the testing center.
- ✓ Disclosing any items from the test after the session
- ✓ Use of unauthorized aids
- ✓ I understand that I must follow all of the testing rules and that any violation will lead to my scores being null and void.
- ✓ Falsifying a GED Certificate or transcript and/or other misconduct as determined by the Chief Examiner or GED State Administrator.

Candidate’s Signature: _____

Date: _____