



GED Verification

To request a copy of your GED transcript and/or certificate please complete and mail this form, along with your payment by check or money order made payable to: **Regional Office of Education #40.**

If you completed your GED in Macoupin County send to:

ROE #40
227 East 1st South
Carlinville, IL 62626

If you completed your GED in Calhoun, Greene, or Jersey County send to:

ROE #40
201 W. Exchange St.
Jerseyville, IL 62052

Please indicate quantity	
Official Transcript	_____ @ \$10.00 ea
Certificate	_____ @ \$10.00 ea
Unofficial Verification	_____ @ no charge

Please print clearly

Last Name _____ **First Name** _____ **MI** _____

Current Address _____

City _____ **State** _____ **Zip** _____

Date of Birth _____ **Social Security #** _____ - _____ - _____

Phone _____ **Last Name at time test was taken** _____

City where test taken _____ **Year test was taken** _____

Email _____

All information is required to make sure that we locate the correct records. If you are unsure of the exact date of testing please put the year or the closest estimate possible.

Signature _____ **Date** _____

If you would like it sent to a different location please include that information here:

