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GED TRANSCRIPT AND CERTIFICATE REQUEST FORM

Use this form to request copies of your GED transcript or certificate **only if you tested in Vermilion County, Illinois**. Please complete this form and submit it with a postal money order, cash, or a check to the Regional Office of Education for the proper amount (\$10.00 for each transcript and \$10.00 for each certificate) to the above address. Please allow 7-10 business days for delivery. **Fees paid are NOT refundable.**

Mark the number of each item you are requesting.

(_____) Transcript (\$10.00 per copy)

Today's date: ____/____/____

(_____) Certificate (\$10.00 per copy)

Total Dollar amount enclosed: \$_____

(Money order must be made payable to Regional Office of Education. No personal checks. Fees are non-refundable.)

Personal Information

Name at time of test: _____

Current Name: _____ Social Security No. ____/____/____

Current Address: _____ Date of Birth: ____/____/____

City: _____ State: _____ Zip _____ Phone No. (____) _____

I _____ hereby authorize my GED scores to be released.

Transcript Recipient Information

Complete this section only if the transcript is not being sent to you.

Name of College: _____ ATTN: _____

Address: _____ City: _____ State: _____ Zip: _____

Name of Employer: _____ ATTN: _____

Address: _____ City: _____ State: _____ Zip: _____