

# GED® Test/Adult Ed Class Parent/Guardian Permission Form

Student

School

Student's Name \_\_\_\_\_

Former School Name (if any) \_\_\_\_\_

Date of Birth \_\_\_\_\_

City/State \_\_\_\_\_

Withdrawal Date \_\_\_\_\_

Public School

Non-Public/Out-of-State School

Parent/Guardian

Notary

I certify that I am the of parent/legal guardian of the above student who last attended and has officially withdrawn from the above educational institution.

By signing below, I hereby grant this student permission to take the GED® test and/or attend GED classes.

Signed this \_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Title (i.e., Parent, Principal, Guardian) \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

On this day, personally appeared before me:

\_\_\_\_\_  
Parent/Legal Guardian

To me known to be the person(s) described in and who executed the within and foregoing instrument and acknowledged that he/she signed the same as his/her voluntary act and deed, for the uses and purposes therein mentioned.

Witness my hand and official seal here to affixed this

\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
My Commission Expires

Notary  
Seal

