## **WORKFORCE DEVELOPMENT**

sdjobs.org

## **UNDERAGE GED® TESTING WAIVER**

For Students Attending School

This form is required for any 16- or 17-year-old students currently attending public or private school wishing to take the GED® test.

PARENT/GUARDIAN PERMISSION	
STUDENT NAME:	
Do not submit this form to the school dist	ict until:
Your student has created an account	
I verify that the child named above is $16 \text{ o}$ child to take the GED $^{\circ}$ test.	17 years old, and I as parent or guardian of this child give permission for the
PARENT/GUARDIAN NAME:	
SIGNATURE:	DATE:
AUTHORIZING INSTITUTION/DISTRICT	
PLEASE CHECK ALL THAT APPLY:	
<ul> <li>The undersigned school administrato deficiency;</li> </ul>	verifies that the child will not graduate with the child's cohort class because of credit
The undersigned court services office	authorizes the child to take the GED test;
<ul> <li>The undersigned official verifies that enclosing a copy of the court order;</li> </ul>	court order has been received requiring the child to enter the GED program and is
The undersigned official verifies that	he child is under the direction of the Department of Corrections; or
<ul> <li>The undersigned official verifies that Investment Act of 1998, as amended</li> </ul>	he child is enrolled in Job Corps as authorized by Title I-C of the Workforce o January 1, 2009.
INSTITUTION/DISTRICT VERIFICATION	
I verify the student named above is eligible	to take the GED <sup>®</sup> test for the reason(s) marked above.
NAME:	
INSTITUTION/DISTRICT:	
SIGNATURE:	DATE:

## SUBMISSION

The school district or authorizing institution will submit this form to <a href="mailto:Barb.Unruh@state.sd.us">Barb.Unruh@state.sd.us</a>