

**NEVADA DEPARTMENT OF EDUCATION**  
**GED REQUEST FORM INSTRUCTIONS:**

- PLEASE READ AND CAREFULLY FOLLOW THE INSTRUCTIONS ON THE FORM BELOW.
- YOU CANNOT FILL IN THE FORM ONLINE – YOU MUST PRINT IT.
- EACH SECTION ON THE REQUEST FORM MUST BE FILLED OUT.
- PLEASE PRINT LEGIBLY IN BLUE OR BLACK INK.
- **THE FORM MUST BE SIGNED IN ORDER TO COMPLETE THE REQUEST.**
- ALLOW ONE WEEK FOR PROCESSING.
- PLEASE DIRECT ALL QUESTIONS TO THE NEVADA DEPARTMENT OF EDUCATION, GED RECORDS: 775-687-7294 OR 775-687-7299

## GED Transcript Request Form

**In order to obtain one or more copies of your Nevada GED transcript, print this form and complete it. Submit it to the GED Office either by fax or mail. This form must be signed. You may request up to five copies at no charge.**

**Nevada Adult Education**  
755 North Roop St, Suite 201  
Carson City, NV 89701  
Ph: (775) 687-7294  
Fax: (775) 687-8636  
<http://www.doe.nv.gov>

**PLEASE LEGIBLY PRINT ALL INFORMATION IN BLUE OR BLACK INK:**

Examinee Name (Last, First, Middle Initial or Maiden Name):

Name you tested under if different from above:

Social Security Number:

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth (Month, Day, Year):

\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Year you received your GED (approximately):

Testing Location City:

Current Address (Street / PO Box # / Apartment):

City / State / Zip Code:

Daytime Phone Number:

\_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_

**Number of copies needed:** \_\_\_\_\_

**IF YOU WOULD LIKE THE TRANSCRIPT MAILED TO AN ADDRESS OTHER THAN YOUR OWN, PLEASE COMPLETE THE SECTION BELOW. USE A SEPARATE PIECE OF PAPER FOR ADDITIONAL ADDRESSES.**

ATTENTION: (Name)

Address (Street / PO Box # / Apartment):

City / State / Zip Code:

Daytime Phone Number:

\_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_

**PLEASE COMPLETE THE FOLLOWING SECTION IF THE TRANSCRIPT IS TO BE FAXED BACK:**

ATTENTION: (Name)

FAX Phone Number:

\_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_

**APPLICATION MUST BE SIGNED BY EXAMINEE**

**Signature of Applicant/Examinee:**

**Date:**

**Mail To:**

**Nevada GED Office**  
755 North Roop Street, Suite 201  
Carson City, NV 89701

**Or FAX To:**

**775-687-8636**  
Attn: GED Records Custodian

**PLEASE ALLOW ONE WEEK FOR PROCESSING**