# DOCUMENTATION OF UNDER-19 ELIGIBILITY
## GED® Testing

**Submit this documentation through any of the following methods:**

- Email a scanned copy (PDF Only) to: **HYPERLINK "mailto:GED@KY.gov" GED@KY.gov**
- Mail to: **Kentucky GED Testing, 500 Mero St, Mail Stop 5SC, Frankfort, KY 40601**
- FAX to: **502-696-5863**

To take the GED® test in Kentucky (13 KAR 3:050), you must be at least 18 years old and have been withdrawn from a public or private education program at least ninety days as certified by the local district or meet other requirements. The only exceptions to test at 17 are: state agency; DJJ-involved; or enrolled in district-operated alternative education programs *and* not on track to graduate. **If you are 18 years of age and enrolled in a Job Corps program, ChalleNGe Academy, or are incarcerated in an adult institution, please call 502-573-5114 or email GED@ky.gov for documentation requirements.**

**Section 1: Applicant *(Required for all applicants)***

| | | |
|---|---|---|
| Name (Last, First, Middle Initial or Maiden Name) | | |
| Date of Birth (Month/Day/Year) ☐☐/☐☐/☐☐☐☐ | Age at application | Last 4 of Social Security Number ■■■-■■-☐☐ |
| Current Address (Street/Apartment) | | |
| City | State | Zip Code |
| Phone ☐☐☐/☐☐☐-☐☐☐☐ | Email Address | |
| Name of school district where you currently live: | | |

**Section 2: Certification of Withdrawal from Public or Private Education Program by the Local School District *(Req. for age 18, not 17)***

School Name:

Address:

The official school withdrawal date for the applicant listed above is:

(Month/Day/Year)
Withdrawal date ☐☐/☐☐/☐☐

Signature of Director of Pupil Personnel

Date Signed ☐☐☐

**Did the student withdraw to Homeschool? *REQUIRED.*** ☐ **Yes** ☐ **No**

**Did the student stop attending without formally withdrawing? *REQUIRED.*** ☐ **Yes** ☐ **No**

**OR**

The applicant named above currently resides in this school district and has not been enrolled the last 90 calendar days or more or has never been enrolled. If certification can be made for less than 90 calendar days, please indicate the last known enrollment date:

(Month/Day/Year)
Last known enrollment date ☐☐/☐☐/☐☐

- over -

Signature of Director of Pupil Personnel | Date Signed

**Section 3: Homeschool Applicants *(Only required for homeschooled students age 18.)***

**To be approved, Section 2 must be completed by the Director of Pupil Personnel.**

In accordance with Kentucky GED® testing policy, I am certifying that my child is the legal age of withdrawal for the school district where we live and that I am no longer homeschooling my child (the applicant named above).

**Date of Completion or End of Homeschool:** ☐☐/☐☐/☐☐☐☐ (Month/Day/Year)

I understand that my child must be 18 to end/complete homeschool and must wait 90 days after the end/completion of homeschool to be eligible to take the GED® test, or, if it has been less than 90 days, obtain a waiver of the 90-day wait period from the local school superintendent.

Signature of Homeschool Parent: Date:

**Section 4: Waiver of 90-day Wait Period *(Only required for 18-year-olds who either 1) withdrew less than 90 days previously, or 2) whose 18th birthday is less than 90 days ago from date of application.)***

Name of school district where student currently lives: County:

Address and City:

I am granting a waiver of the 90-day school withdrawal to the applicant named above for employment, postsecondary enrollment, medical reason, family circumstance, or other.

Print Name and Title: Date:

☐☐/☐☐/☐☐☐☐

**Signature of Superintendent or Authorized Designee:**

**Section 5: State Agency Child, Youth in Juvenile Detention, Youth in District-Operated Alternative Education Program *(17-year-olds and select 18-year-olds)***

Name of school district where the student currently resides:_____ County:_____

I grant permission to take the GED® test to the applicant named above who is in the selected exempt group listed below:

☐ **State agency child** – *17 only* – must have the local school superintendent sign below **and** submit a letter documenting that the Service Region Administrator or designee has been notified of the intent to take the GED® test.

☐ **Youth in juvenile detention center or school under the Department for Juvenile Justice** – *17 only* – must have the local school superintendent sign below **and** submit an additional DJJ-GED® form. Email GED@ky.gov to request the form.

☐ **Youth in District-Operated Alternative Education Program** – *17 and older who have passed at least one Ready test module* – must have the local school superintendent sign below **and** submit letter attesting that youth is not on track to graduate per locally-established policy.

Print Name and Title: Date: ☐☐/☐☐/☐☐☐☐

**Signature of Superintendent or Authorized Designee:**

**Guidance:**

- **18-year-olds must be withdrawn from an education program in order to access Adult Education services and take the GED® Test, unless enrolled in a district-operated alternative education program. DPP signature is required in Section 2 for withdrawal.**
- **An 18-year-old must not be withdrawn from an education program or homeschool before the 18th birthday.**
- **If withdrawn for less than 90 days, or if the 18th birthday was less than 90 days ago, Section 4 is required.**
- **Those being served in alternative education programs per KRS 158.143 must NOT be withdrawn from the district in order to take the GED® test and will not be served by the local Adult Education program. Superintendent or authorized designee signature is required in Section 5.**