

# Ohio GED Parental Consent Form

**NOTE:** If you are 16 or 17 years of age, this form must be completed and sent to the GED Office with your Confirmation Form or GED Application.

I, \_\_\_\_\_  
Parent or Guardian Signature (if under 18)      Parent or Guardian Printed Name      Date

grant consent for \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_,  
Print Applicant Name      Date of Birth

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_, to take the Official General Education Development (GED) Test.  
Applicant ID number used on Test Application

**Relationship to Applicant:**

Parent     Guardian (Please attach copy of court order appointing guardianship or emancipation.)

**NOTARY:**

Subscribed before me in the City of \_\_\_\_\_ County of \_\_\_\_\_,  
State of \_\_\_\_\_, United States of America, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

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

**NOTARY PUBLIC STAMP**

My Commission Expiration Date: \_\_\_\_\_

If you applied online, please mail one copy of the Confirmation Sheet with this completed form to:

GED Application Office  
Ohio Department of Education  
25 S. Front St., 1<sup>st</sup> Floor  
Columbus, OH 43215