

STATE OF ALASKA

DEPARTMENT OF LABOR & WORKFORCE DEVELOPMENT
EMPLOYMENT SECURITY DIVISION

Sean Parnell, GOVERNOR

State of Alaska
Department of Labor and
Workforce Development
ESD, GED Office

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I _____

give the Adult Basic Education Program permission to release my GED transcripts.

The name I tested under was _____

My date of birth is _____

My SSN # is _____

The year I earned my GED was _____

What city/town in Alaska did you test in?

Contact Telephone Number _____

My current mailing address is

If GED transcripts are to be released to a third party please give:

Name _____

Address or fax number _____

Signature _____ Date _____

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