TMCC
Truckee Meadows Community College
Counseling

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GED PARENTAL/GUARDIAN PERMISSION SLIP

PARENTAL PERMISSION FORM TO TAKE THE GED EXAM
FOR PERSONS LESS THAN 18 YEARS OF AGE

Applicant Name: _____
First Last MI

Street Address: _____

City: _____ State: ____ Zip Code: _____

Phone Number: _____
Home Alternate

Applicant's Social Security Number: _____

Applicant's Date of Birth: _____

Applicant's County of Residence: _____

I declare that I am the parent or legal guardian of the above named individual and I give my permission for him/her to take the GED exam.

_____ _____
Parent/Guardian Signature Date

Parent/Guardian Name (please print or type): _____

Parent/Guardian Street Address: _____

City: _____ State: ____ Zip Code: _____

TMCC is an EEO/AA (equal opportunity/affirmative action) institution and does not discriminate on the basis of sex, age, race, color, religion, disability, national origin or sexual orientation in the programs or activities which it operates.

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