PARENTAL PERMISSION FORM
(Must be completed in the presence of a Notary)

To Whom It May Concern:

I ________________________________________, the parent or legal guardian of
(minor’s name) ________________________________________, give my
permission for my son or daughter (circle one) to take the General Educational Development
(GED) Test.

______________________________________________
(print name)

______________________________________________
(signature)

State of Arizona
County of __________________________

On this __________ day of __________, __________,
Day   Month   Year

before me personally appeared

______________________________________________________,
Name of Signer(s)

Whose identity was proved to me on the basis of satisfactory evidence to be the person whose
name is subscribed to this document, and who acknowledged that he/she signed the above
document.

______________________________________________ (Notary Public)