KY ADULT EDUCATOR'S

GED HANDBOOK

July 2005

Kentucky Adult Education
Council on Postsecondary Education
1024 Capital Center Drive, Suite 250
Frankfort, KY 40601
502-573-5114

TABLE OF CONTENTS

Introduction

Section 1: Basic Information about the GED Tests 2
Section 2: Eligibility 4
- The GED Testing Application (KYAE-6) 5

Section 3: The U.S. Demographics 6
Section 4: Official GED Test Center Rules 7
- GED Testing Misconduct Policy 8
- Required Practices at GED Test Centers 9

Section 5: Test Taking Strategies for the GED 10
- General Tips 10
- Testing Within Time Limits 10
- Tips for the Math Test 10
- Tips for the Essay 11
- How the Essay is Scored 13

Section 6 Test Results 14
- Requests for Duplicate Transcripts 16

Section 7 Testing Accommodations 17
- Procedures for Requesting Accommodations 18
- Accommodations Available Without Approval 20

Section 8 Frequently Asked Questions 21

Appendix A GED Eligibility Regulation 785 KAR 1:130 i
Appendix B Sample of a Completed KYAE-6 GED Testing Application Form ii
Appendix B1 Blank KYAE-6 GED Testing Application Form .....
Appendix C Sample Demographics Form iv
Appendix C1 Instructions and Kentucky Questions for Completing Demographic Form ...
Appendix D Instructional Center Code Listings xii
Appendix E Holistic Scoring Guide xiii
Appendix F Essay Scoring Guide xiv
Appendix G How to Interpret the Transcript, Official and Unofficial Transcripts xv
Appendix H GED Transcript/Diploma Request Form xviii
Appendix I Release of Records Consent Form xix
Appendix J Official GED Test Centers in Kentucky xx
Appendix K GED Resources xxv
Appendix L Forms for Requesting Testing Accommodations xxv

INTRODUCTION

Adult education is more than just the GED. However, in Kentucky where nearly one in five people do not have a high school credential, earning a GED is often the bridge that helps them gain employment/advancement or admission to postsecondary education or training.

The GED Tests provide a uniform measure of high school achievement. Passing the tests means the same in every state from Maine to California and throughout Canada. Because of the rigor, validity, and reliability of the GED tests, the GED credential is accepted by 95 percent of employers and 97 percent of higher education institutions. The tests are designed so those who pass the GED tests meet or exceed the performance of that demonstrated by four of every 10 traditional high school graduates.

In FY 2004-2005, 13,071 people in Kentucky took the GED tests: 9,757 passed for a passing rate of 74 percent. This is due to the work adult educators do to prepare students for the GED.

There must be a clear separation between GED instruction and GED testing to protect the integrity of the GED tests. This handbook contains information about the GED tests written specifically for Adult Education Professionals. This information is provided so adult educators can better prepare students for the GED test session.

The handbook also contains information about the policies and procedures of Official GED Test Centers to foster better understanding and cooperation between adult education providers and test center examiners.

BASIC INFORMATION ABOUT THE GED TESTS

The Tests of General Education Development (GED Tests) consist of five tests that measure achievement in subject areas associated with a high school program of study. The GED Testing Service of the American Council on Education makes these tests available. Each year, approximately 800,000 people take the GED Tests nationwide. About one in seven high school diplomas issued in the United States each year is based on passing the GED Tests.

What's on the GED Tests?

Test	Content Areas	Items	Time Limit
Language Arts, Writing Part I Part II	**Part I:** Organization (15%); Sentence Structure (30%); Usage (30%); Mechanics (25%) **Part II**: Essay (direct writing exercise)	50 questions and an essay	2 hrs. (total): Part I- 75 min. Part II- 45 min.
Mathematics Part I (calculator) Part II	Number Operations and Number Sense (25%); Measurement and Geometry (25%); Data Analysis, Statistics, and Probability (25%); Algebra, Functions and Patterns (25%)	Part I: 25 questions Part II: 25 questions	90 min. (total): Part I- 45 min. Part II- 45 min.
Science	Life Science (45%); Earth and Space Science (20%); Physical Science (Chemistry & Physics)(35%)	50 questions	80 min.
Social Studies	National History (25%); World History (15%); Economics (20%); Civics and Government (25%); Geography (15%)	50 questions	70 min.
Language Arts, Reading	Literary Texts—poetry, drama, prose (75%); Nonfiction Prose (25%))	40 questions	65 min.

Total test administration time for the GED Tests is 7 hours, 5 minutes.

An examinee may test on each subject area <u>three times</u> in a calendar year. An examinee may not retest on any subject until all five have been taken the first time.

The tests are available in different formats: English Print, Spanish Print, Large Print, and Audiocassette. Special permission must be granted by the State GED Administrator to receive the Audiocassette version of the tests.

WHO MAY TAKE THE GED TESTS IN KENTUCKY

General Eligibility Requirements

- Applicants must have a Kentucky address.
- Applicants must pass the Official GED Practice Test and have a completed **GED Testing Application Form (formerly DAEL-6, now KYAE-6)** signed by the approved adult education provider. KET students do not have to meet this requirement and are issued a KYAE-6 form on light blue paper.
- Applicants must be 19 years of age.
- Applicants must be at least 16 years of age and:
  - Withdrawn from public or private school for 90 days as certified by the local school district. This proof must be on a school form or official letterhead and be attached to the KYAE-6 form.
  - Or, receive a superintendent's waiver of the 90 days for a postsecondary enrollment deadline, a condition of employment, medical reason, or family circumstances. The superintendent or designee must sign the back of the KYAE-6 form to grant approval.

Home school applicants at least 16 years old may establish a withdrawal date from home school by presenting a letter (attached to the KYAE-6) from the home school to the local school superintendent indicating the applicant has withdrawn from home school. The date of the letter to the superintendent is the date of withdrawal; the applicant must have been withdrawn from home school for 90 days.

Exemptions

Applicants at least 16 years of age with a Kentucky address may take the GED tests if they are certified as test ready and meet the following conditions:

- Enrolled in a Kentucky Department of Education approved GED Secondary Program and approved for the GED tests by the superintendent; superintendent must sign the back of the KYAE-6.
- Enrolled in a Job Corps program.
- Court ordered to take the GED test. A copy of the court order must accompany the KYAE-6 form.
- A state agency child with approval from the Agency Program Administrator as indicated with the signature on the back of the KYAE-6.
- Detained in a juvenile detention or juvenile holding facility and:
  - at least one year behind academically,
  - a minimum stay in detention of 30 days,
  - approved for the GED test by the local school superintendent; superintendent must sign the back of the KYAE-6.
- Committed or placed in a state correctional facility.

No one younger than 16 years of age may take the GED tests.

The eligibility regulation 785 KAR 1:130 is in Appendix A.

THE GED TESTING APPLICATION

A completed GED Testing Application (formerly DAEL-6; now KYAE-6) is required for each applicant taking the GED tests in Kentucky for the first time.

The form is divided into three sections (see Appendix B1 for form):

- Applicant information
- Certification for exemption
- Test Readiness certification

Applicant Information
The applicant should complete page one of the form in blue or black ink. In addition to the personal identifying information, the applicant is asked to specify the last school attended along with the NCES (National Center for Education Statistics) Code.

Find NCES Codes at http://nces.ed.gov/ccd/districtsearch/

Applicants younger than 19 years of age must provide documented proof of withdrawal from public or private school and attach the documentation to the application. This documentation must be on official school letterhead or school form.

The applicant is asked to initial beside five certifying statements and one statement authorizing release of test results to the certifying provider. The applicant is not required to allow release of scores.

The applicant must sign at the bottom of the page.

Certification for Exemption
This section is completed only if the applicant is in the Secondary GED Program, a state agency child, in a juvenile detention center, or if a superintendent is granting a waiver of the 90-day school withdrawal provision.
The superintendent's signature is required for these exemptions:

- Secondary GED Program
- Candidate in a juvenile detention center
- Waiver of the 90-day school withdrawal provision

A state agency child requires the signature of the child program administrator.

Test Readiness Certification
Test readiness must be certified by an approved adult educator. Each program files the approved signature with the State GED Administrator's office. The signature of the adult education provider indicates that the applicant has passed all five parts of the official practice test with the same scores required to pass the GED. The adult educator must enter the Official Practice Test scores on the KYAE-6 and provide the date of the assessment.

The adult education provider should complete the provider block with the name of the adult education center, address, and phone number.

The provider/instruction program code must be entered. The provider code is a six-digit number assigned by the GED Office. It is not the same as the AERIN code. The AERIN code is alpha-numeric and the provider code is numeric so it can be used on the demographic form. If the provider code is not completed correctly, KYAE cannot provide data to a program that would assist in improving instruction. A list of provider codes is in Appendix D.

How to File the KYAE-6 GED Testing Application

The GED candidate must provide the GED examiner with the original KYAE-6 GED Testing Application. This is the required document, along with a picture ID, that establishes eligibility to take the GED tests.

The KYAE-6 form is good for six months from the date on the form. The examinee has that amount of time to register and begin taking the GED tests. There is currently no time limit on the amount of time an examinee has to complete or pass the GED tests.

The KYAE-6 is a part of the GED regulation. It cannot be altered or amended without going through the legislative review process. The regulation was last amended August 25, 2005.

A sample of a completed KYAE-6 form is in Appendix B.

THE U.S. DEMOGRAPHICS FORM

The eight-page U.S. Demographics form is important for

- The examinee
- The adult education center
- The test centers
- Kentucky Adult Education
- GED Testing Services

The information on the demographics form creates the test record for each examinee. If the examinee name, address, social security number, birth date, and test date are not correct, the examinee may not receive accurate and timely test results.

The demographics form is the only place the examinee enters his/her address. This is where the transcript and diploma will be mailed. A permanent, Kentucky address must be used.

The demographic data can be analyzed at the program level if the six-digit provider code is entered correctly. The six-digit provider code is entered on the demographic form on page 8, question 2 (Instructional Center Code). Provider codes are assigned by the state GED office. A list of codes is in Appendix D.

Kentucky has added ten state-specific questions to the demographics form. Six questions gather information that will be used for data analysis to help programs improve instruction. Four of the questions allow students to give permission to be contacted about educational and job opportunities. These questions are answered as questions 32-41 on page 8 of the demographics form. Each question is answered YES or NO. The state-specific questions must be provided to students on a separate sheet. This sheet, including instructions on completing the demographics form, is in Appendix C1.

Adult educators MUST assist students so information is correctly recorded on the demographics form. The form is scanned and only the bubbled information is read by the computer. Please review the bubbled information rather than the printed information.

The Demographics forms are available from your Official GED Test Center.

A sample Demographics Form and instructions are in Appendix C.

RULES FOR THE OFFICIAL GED TEST SESSION

There is a pre-registration policy for Kentucky test centers and only those scheduled in advance will be allowed to enter the test session.

Bring to the Test Session

Required Documentation:

1. Government issued **picture ID** that contains examinee name, address, date of birth, and a signature must be presented at each test session.

   Examples of **approved identification** are
   - Driver's licenses
   - State ID Card (issued by Circuit Court clerk)
   - Passports
   - Military papers
   - Forms of government (national or foreign) identification that shows the required information.
   - The Matricula Consular, which is an official ID card issued by the Mexican Government through its Consular Offices.
   - Identification from a post-secondary institution that shows the required information.

   High school ID cards are not allowed.

2. GED Testing Application, KYAE-6 (formerly DAEL-6), completed in ink with appropriate signatures and any required documentation.
3. Blue 8-page demographic form completed in pencil. Do not fold.
4. If an examinee is retesting, a copy of the previous score report should be presented.

Fees: (Effective January 1, 2005)

1. The fee is $40 for examinees taking all five parts of the test.
2. The fee is $10 per subject (subtest) for examinees taking individual tests or retesting.

Do Not Bring to the Test Session

Examinees should not bring purses, tote bags, pagers, cell phones, portable music players, hand-held electronic games, food items, textbooks, notebooks, supplies, jackets, coats, hats, or other nonessential items. An area will be provided where examinees can store personal items during the examination.

Nothing is allowed at the examinee desk except testing materials provided by the examiner.

GED TESTING MISCONDUCT POLICY

The GED Testing Service in Washington, DC requires strict enforcement of testing standards. Examiners advise examinees that scores will be invalidated and a GED certificate may be denied or revoked if they engage in any of the following misconduct:

- Presenting false identification.
- Impersonating someone else.
- Receiving test questions or answers in advance.
- Talking during the test.
- Copying from another examinee.
- Removing or attempting to remove any part of the test from the testing room.
- Using unauthorized aids.
- Taking an unauthorized time extension.
- Leaving seat during testing without permission from the examiner.
- Sitting in a seat other than the one assigned by the examiner.
- **Disclosing any items or essay topic from the test after the testing session.**
- Falsifying a GED certificate or transcript.
- Taking the GED Test more than three times during a calendar year.
- Taking the same form of the GED Test more than once.
- And/or other misconduct or behavior as determined by the GED Chief. Examiner or GED State Administrator.

Adult Educator Misconduct

- Entering the test room during test administration.
- Soliciting information from students about essay topics or other questions on the tests.

REQUIRED PRACTICES AT GED TEST CENTERS

Every official GED test center is under contract with GED Testing Service, an arm of the American Council on Education. The GED Testing Service has rules and guidelines about where the test centers can be located, how the test is administered, and who may take the tests. Each test center has to operate according to these rules in order to remain a test center. Failure to operate according to the rules results in the closure of the test center.

Each state is required to have a State GED Administrator to oversee its GED test centers. B. J. Helton is the current State GED Administrator in Kentucky.

Test Centers receive no state or federal funding specifically for GED testing. The centers are expected to operate from the test fees.

What you can expect from your test center

- Tests administered on the scheduled dates and times.
- Tests administered according to uniform guidelines so all examinees have the same opportunity to do well on the test wherever and whenever it is given.
- A comfortable, well-lit, quiet, ADA accessible test room.
- Parking available for examinees during test and signs directing examinees to the test room.
- Assistance in pre-registering for the test.
- Examiner at the test site one-half hour before the exam.
- Examinees receive scores in three weeks (15 working days).
- Examiners treat examinees with respect.
- Examiner returns your calls and answers questions from examinees.

What your test center cannot do

- Allow students to test without government-issued photo identification.
- Allow students to test without KYAE-6 form with all the required signatures and documentation.
- Admit students not registered in advance to the test session.
- Allow students to enter the test after the session has started.
- Grant time-extensions, allow an examinee to leave the examination room during a test or give other accommodations without prior approval from the state GED administrator.
- Test more than 20 people in one session unless there is a second examiner or approved proctor present.
- Test more people than they have test batteries.
- Test at a site that is not on their contract.
- Allow someone other than an examiner to administer the test.
- Allow adult education providers in the test session.
- Answer the telephone or be disturbed during the test session.

TEST TAKING STRATEGIES FOR THE GED

General Tips
The scores on the GED tests are based only on the number of questions answered correctly. It is to the candidate's advantage to answer every question. An examinee should not spend too much time on each question. If an examinee does not know the answer to a question, they should mark the answer that appears to be the best of the five choices.

If two answers are marked for a question, the candidate will receive no credit for that question. Only one response can be marked for each question. There is only one correct answer for each question.

The candidate should make sure the marks on the answer sheet are dark and completely fill the circles. On the Writing Skills answer sheet the multiple-choice questions have a large bubble surrounding a smaller white bubble; only the smaller white bubble needs to be filled. Make no stray marks on the answer sheet booklet. If the candidate erases, it should be done completely. Make sure that every circle marked on the answer sheet booklet corresponds to the number of the question and to the candidate's answer choice.

Tips for Testing Within the Time Limits
The time limits are sufficient to permit at least 85 percent of the GED candidates to complete the tests while working at a comfortable rate. The use of uniform time limits permits GED Testing Services to ensure each candidate is given the same opportunity to do well on the tests wherever and whenever they are administered.

The examiner will post the time each test begins and the time each test ends. Candidates should note the time and be aware they will be asked to turn in test materials when the time has elapsed.

Candidates sometimes encounter problems with the time limit on the Social Studies test; the Social Studies test and the Science test have the same number of questions (50 each) but the time limit for the Social Studies test (70 min.) is ten minutes less than for Science (80 min.).

Tips for the Mathematics Test
The Mathematics test is in two parts. A calculator is provided by the test center and may be used on Part 1 of the Mathematics test (25 questions). The calculator is not permitted on Part 2 (25 questions).

Most of the questions (80 percent) on the Mathematics test are multiple-choice format; 20 percent of the questions must be answered on an alternate-format grid. All the correct answers fit the alternate format grids. If an examinee has an answer that does not fit they should reread the question to make sure they have given the answer in the form requested. Mixed numbers, such as 3 ½, cannot be entered in the alternate format grid. Instead, represent them as decimal or

fraction form. No answer can be a negative number. Answers can begin in any column that will allow the answer to be entered, but a blank space cannot be placed in the middle of an answer.

A common mistake is to mark more than one answer on the coordinate plane grid. Examinees should mark only the one circle that represents their answer. If more than one answer is given the candidate will receive no credit for the answer.

Formulas are provided in the Mathematics test booklet. Only some of the questions require the use of a formula and not all formulas printed in the booklet will be needed.

Tips for the Essay

The essay must be written on the topic assigned at the examination session. The student reads the assigned essay topic before beginning the Writing Skills test. The topics are assigned randomly.

Exemptions to the assigned topic may be granted because the topic is inappropriate due to a candidate's disability, religion, or incarceration. Examinees who think they should be granted an exemption for one of these reasons can notify the examiner at the test session after reading their assigned topic. Exemptions are not allowed because a candidate does not understand the topic or has no opinion about the subject. All exemptions must be filed with GED Testing Services in Washington and with the State GED Administrator in Frankfort.

If a student writes an essay on a topic other than the one assigned, the essay will not receive a score. The student will receive a score of 0 and will have to take both parts of the Writing Test again. It will be noted on the test history that the essay was **off-topic**.

If a student writes an inadequate essay, the student will receive a score of 0 and will have to take both parts of the Writing Test again. It will be noted on the test history that the topic was **inadequate**.

The essay written during the GED examination is considered draft writing. It is expected that the student will have to cross-out words to make corrections. It does not matter if a student uses cursive writing or printing. While students should write as clearly as possible, handwriting and neatness do not affect the essay score.

The student is given a sheet of lined scratch paper to use during the Writing Skills test. This sheet of scratch paper will not be scored; it will be collected with all other test materials at the end of the test and shredded.

The essay must be written in blue or black ballpoint ink on pages 3 and 4 of the Language Arts, Writing Test answer sheet booklet during the two hour time period of the examination. All candidates must write their essays on the answer sheets. If the essay exceeds the space provided, additional paper or use of a

second answer sheet is not allowed. Only the writing on the two lined pages in the answer sheet booklet will be scored.

GED Testing Service in Washington prohibits discussing or publicizing the topic or content of any essay. The essay must be treated as confidential material.

The essay topics are just like questions and it is considered testing misconduct to disclose the essay topic.

THE GED ESSAY

GED candidates have been required to write an essay as a part of the Language Arts, Writing Test since 1988. The essay represents approximately 35% of the total Language Arts, Writing Test score.

Scores on the essay range from 1 (inadequate) to 4 (effective). The scores reflect rankings assigned to essays written by the norming population of graduating high school seniors.

The essay is scored at a scoring service by readers certified by GED Testing Service. To maintain high reliability among readers, GED Testing Service provides clear standards against which readers and scoring sites are evaluated. Readers begin each grading session by reviewing these standards that include sample papers that demonstrate the acceptable range of each essay score.

Each essay is scored by at least two readers. Reader one reads the essay and gives it a score. Reader one then masks the score so no other readers can see it. Reader two reads the essay and gives it a score. After both readers have given a score, the scores are unmasked. If the scores given by both readers differ by no more than one point then the two readers' scores are added and divided by two in order to determine the essay score. If the scores given by the two readers differ by more than one point, the essay is given to the Chief Reader to score. The score given by the Chief Reader and one of the original readers are averaged to give the final essay score.

Readers use the holistic scoring method. The overall effectiveness of the essay is evaluated without marking specific elements. Guidelines for holistic scoring are included in Appendix E. The four-point scale for scoring the essay is given in Appendix F. Educators can find sample essays that demonstrate each level of writing in the Administrator's Manual for the Official GED Practice Tests.

TEST RESULTS

GED candidates should expect to receive results in the mail from the State GED office in approximately 15 working days from the examination date.

No Preferential Treatment

All GED answer sheets are handled as if a job or entry into school or the military depends on the results being obtained in a timely manner. Answer sheets are scored in batches by test date. There is no preferential treatment for a candidate needing scores by a certain date.

Non-Passing Results

If a candidate does not pass, they receive an unofficial transcript with scores for each of the tests taken. Only the highest scores earned on each subtest are printed. If the student retested and the scores did not change, then the retest resulted in scores that were lower or the same as the reported score. The fact that a new report has been printed is proof that the retest has been graded. A candidate must successfully complete all five tests in order to receive a passing transcript. In addition to the unofficial transcript a letter from Dr. Cheryl King is enclosed which explains what scores the candidate must have to pass in Kentucky. The letter encourages the student to continue studying at either an adult education center, GED Connection on KET or online at www.KYVAE.org.

Passing Results

When a candidate passes they will receive a diploma and an official transcript. A notice is included which reminds the graduate to store the transcript and diploma in a safe and accessible place since the documents will be needed for employment and educational purposes. The student is advised that they will have to pay a fee to receive duplicate copies of the GED. The student also receives a letter of congratulations from Dr. Cheryl King. The letter encourages the graduate to consider postsecondary education or training. Information on financial aid from the Kentucky Higher Education Assistance Authority is enclosed. Information from KCTCS is also included.

Passing Score Requirements

To earn a GED a candidate must meet two requirements:

1. **Earn a minimum score of 410 on each of the five tests**.

AND

2. **Earn a minimum of 2250 points on the five tests combined** (this is the same as an average score of 450 on each of the five tests).

Test results are expressed as standard scores ranging from 200 to 800.

If an examinee fails the Language Arts, Writing Test because of a failing essay, that information is provided on the transcript: 0 represents an inadequate essay or off-topic essay.

Sample Test Results

Example 1	**Example 2**	**Example 3**
Reading—430 Writing—440 Mathematics—410 Science—450 Social Studies—420 **Total—2150** **Results—Non Passing** This person had at least a 410 on each test but did not have a total of 2250 points.	Reading—470 Writing—460 Mathematics—440 Science—520 Social Studies—430 **Total—2320** **Results—Passed** This person had at least a 410 on each test and a total of over 2250 points.	Reading—480 Writing—400 Mathematics—400 Science—520 Social Studies—620 **Total—2420** **Results—Non Passing** This person had the required 2250 total points but not a minimum of 410 on each test.

See Appendix G for instructions about how to interpret the information on the transcript, a sample of the official transcript of GED Test Results (for passing results) and a sample of the unofficial transcript (for non passing results).

REQUESTS FOR DUPLICATE TRANSCRIPTS

Only the State GED Office can provide an official copy of a GED Transcript or Diploma.

Under the Family Educational Rights to Privacy Act of 1974, the Kentucky Adult Education office cannot give scores or pass/fail information by phone and cannot honor verbal requests for duplicate transcripts or diplomas. Since a fee is assessed for duplicate transcripts or diplomas, requests made by e-mail or FAX cannot be accepted.

To request a transcript or replacement diploma, please provide the following:

- Full name under which you tested
- Social Security number
- Date of birth
- When (approximate year) and where you tested (name of learning center, county, or city)
- A money order made out to the KY State Treasurer (personal checks are NOT accepted) A duplicate transcript ($5), a replacement diploma ($25);
- A complete mailing address (home, school, or business).
- If you are requesting your transcript/diploma be sent to an employer or postsecondary institution, you must provide a signed release of records consent form. If employer or postsecondary institution does not have a release of information form, use the **release of information form provided in Appendix I. A copy of the request form is also available on the KYAE Web site.**

Mail the request to (faxes and e-mails are not accepted):

ATTENTION: GED Office
Kentucky Adult Education, Council on Postsecondary Education
1024 Capital Center Drive, Suite 250
Frankfort, KY 40601

Please allow 10 working days for processing of duplicate transcript requests. Processed requests cannot be e-mailed or sent by FAX.

Students should request a transcript rather than a diploma since more information is provided.

A copy of the GED Transcript/Diploma Request form has been provided in Appendix H. This form is available on the KYAE Web site.

PROCEDURES FOR REQUESTING TESTING ACCOMMODATIONS

In compliance with the requirements of the Americans with Disabilities Act (ADA), the GED tests must be offered in a place and manner that is accessible to persons with disabilities. This means GED test centers must be ADA accessible. It also means testing accommodations are available to those with documented disabilities.

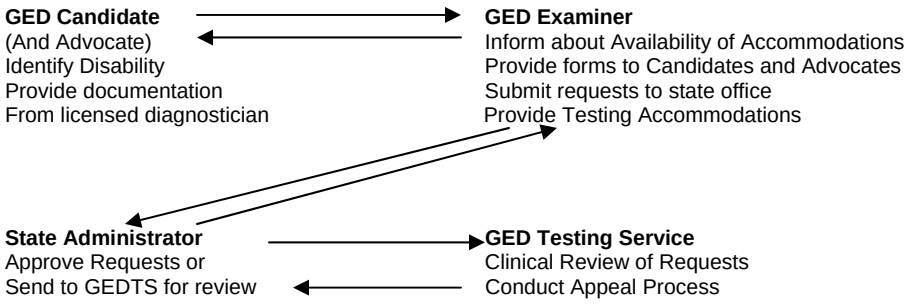
In order to receive accommodations in testing, candidates must submit a request form with documentation from a licensed diagnostician and receive approval from the State GED Administrator. An Examiner may not provide accommodated testing to a candidate without prior approval from the state GED office. Providing accommodations without prior approval can result in the closure of the test center. Some modifications to standard testing, such as providing a large print version of the test at standard time, are permitted without prior approval. A list of accommodations that can be provided without prior approval is included in this section.

The test center must provide testing accommodations to all candidates granted approval for the accommodations by the state GED office. After the candidate receives approval for testing accommodations, the Examiner and candidate should jointly schedule a test date. The Kentucky State Administrator's office asks that Examiners schedule the accommodated test sessions within six weeks of the time the approved candidate requests the session. No candidate can be charged a fee in excess of the standard test fee for an accommodated test session.

An accommodation in testing does not ensure that a candidate will pass—the accommodation is to "level the playing field" for those with documented disabilities. Those granted testing accommodations must meet the Kentucky eligibility requirements, including passing the Official Practice Test. Those granted testing accommodations may take the Official Practice Test with the approved accommodations.

Overview of the Request Process

Requesting and receiving testing accommodations involves the candidate, the Examiner, the State Administrator, and GED Testing Service.
An adult educator or other interested party may act as an advocate and help the GED candidate through the request procedure.



Role of the Adult Educator

- The adult educator can help identify candidates with disabilities.
- The educator can employ instructional strategies to help candidates with disabilities prepare for the GED.
- The educator can advise candidates about the testing accommodations available on the GED and assist the candidate through the request process.
- The educator can provide supporting documentation for the request for accommodation. Such supporting documentation may include instructional strategies used with the candidate, candidate history, and OPT results with/without accommodations.
- The adult educator can act as the advocate for candidates.

Role of the Advocate

The advocate is an adult (often an adult educator) who helps the GED candidate when he/she:

- Physically can not complete the form(s)
- Is not sure how to complete the form
- Is unable to get the diagnosing professional to put the information on the form
- Has difficulty following the multi-step process.

If the student has a copy of the report from a licensed diagnostician, an advocate can transcribe all the information requested onto the appropriate request form (from the originally signed report), **attach a copy of the report to the accommodation request, and** complete the advocate information as requested in section 3 of the request forms.

Forms for Requesting Testing Accommodations
In 2005 the GED Testing Service released four new forms for requesting testing accommodations. These forms specifically address the disability and clearly state the documentation needed. The testing accommodations request forms are as follows:

- **Attention- Deficit/Hyperactivity Disorder**
- **Emotional/Mental Health**
- **Learning and Other Cognitive Disabilities**
- **Physical/Chronic Health Disability**

These forms are available on the KYAE Web site, www.kyae.ky.gov, and the American Council on Education, GED Testing Service Web site, www.acenet.edu. These forms can be printed from these sites and copied. They can be printed in black and white; color printing is not necessary. The forms are also available in Appendix L.

In addition to the request forms, a **Checklist for Completing Testing Accommodations Request Form**(s) and a **Testing Accommodations Appeal** form are available. These forms are available at the same Web sites as the forms and in Appendix L.

Completing the Request Forms
Each request form is in four sections. Sections 1, 2, and 4 are the same on each form. Section 3 requires documentation relating to the specific disability and is different for each request form.
Section 1: Must be completed by candidate. Requires candidate or parent/guardian (for candidates under 18) to sign the statement authorizing release of psychological or medical information.
Section 2: Must be completed by GED Chief Examiner at local testing center. Examiner completes all information when giving form to candidate but does not sign until the completed form is submitted.
Section 3: Requires documentation from a licensed diagnostician relating to the specific disability. Required documentation for each form is provided below.
Section 4: Completed by State GED Administrator.

Required Documentation from Licensed Diagnostician
Section 3 of each request form requires specific documentation from a certifying professional. The documentation must include the diagnosis, supporting documentation for the diagnosis, provide the functional limitations of the condition, request specific accommodations and provide rational for how the accommodations address the limitations. Here is the specific documentation required for each form:

- **Attention- Deficit/Hyperactivity Disorder:** A letter on official letterhead, signed by a psychiatrist, medical doctor, or psychologist who specializes in the diagnosis of ADHD, stating the diagnosis of ADHD and providing supporting diagnostic evidence of this disability. A DSM-IV diagnosis must be included. Documentation is current if within 3 years.

- **Emotional/Mental Health:** Documentation must include a letter on official letterhead, signed by a certifying professional who specializes in the diagnosis of the disability, and providing supporting documentation of this disability. A DSM-IV diagnosis must be included. Documentation is current if within 6 months.
- **Learning and Other Cognitive Disabilities:** Requires
    - An approved measurement of academic achievement (WJ-R, WJ-III, Ach., WIAT-I, WIAT-II). Other accepted tests are printed on the form. **WRAT-III is not accepted.** Standard scores should be used. Provide subtest scores if available.
    - An approved measurement of potential or Intelligence (WIC-III, WAIS-III). Other accepted tests are printed on the form. Standard scores should be used. Provide Index and subtest scores if available.
    - A DSM-IV diagnosis.

  Documentation is current if within 5 years.
- **Physical/Chronic Health Disability**: A letter on official letterhead, signed by a qualified professional, stating the diagnosed disability and providing supporting documentation of the disability. Documentation should reflect current functional limitation. Documentation is current if within 6 months.

Please do not submit notes on prescription pads in lieu of the official letter.

Older documentation will be considered, if that is all the candidate can provide without undue burden or expense.

Identifying Resources in the Local Community

Vocational Rehabilitation has proved a valuable resource for candidates also seeking employment. Qualified candidates are often able to receive the required achievement and IQ tests free of charge with a referral from vocational rehabilitation.

The Individual Education Plans done by schools may contain some of the required documentation. If a candidate has had such a school plan within the last five years, an advocate should help the candidate check the plans to see if it contains approved assessments given by a licensed diagnostician and a DSM-IV diagnosis. Using the information from the school records the advocate can fill in the appropriate information on the request form and attach the full school report.

The Review Process

The local Chief Examiner reviews the request for completeness and sends the request to the State Administrator's office for review. The review at the state level takes one to two weeks. If the state office is not able to make a determination, the request is sent to GEDTS in Washington for a clinical review by a special accommodations panel. This review is supposed to take one month. The request is returned to the state office. The state office returns the request to the test center.

The Chief Examiner at the test center provides the candidate with the results of the review process and schedules a test date with the candidate if approved accommodations are granted.

ACCOMMODATIONS AVAILABLE FOR THE GED

For Candidates who are Deaf or Hard of Hearing

- Signed, captioned videotape of test instructions.
- Printed test instructions.
- Candidates may ask questions in writing to the Chief Examiner regarding all printed instructions and information.
- An interpreter to interpret instructions and administration information.
- For those candidates who are deaf and hard of hearing and for whom Standard Written English is a second language, extended time is an option.
- The candidate could use a videotape to compose the essay in rough draft, to be translated by the candidate into Standard Written English.

For Candidates who are Blind or Visually Impaired

- Nonstandard edition of the GED Test—Braille, Audiocassette, Large Print.
- Many aids are permitted—talking calculators, visual adaptive devices, closed-circuit TV.
- For candidates who are unable to complete the standard answer sheet, they may use any Braille-writing device and a scribe.

For Candidates with Learning Disabilities or ADHD

- Dyslexia—extended time, audiocassette.
- Dysgraphia—extended time, scribe.
- Dyscalculia—extended time, calculator.
- Attention-Deficit/Hyperactivity Disorder (ADHD)—extended time, frequent breaks, private room.

These licensed diagnosticians may certify a candidate's disability.

Disability Type	Professional
Learning Disability	Psychologist, School Psychologists, Educational specialist with Advanced Training
Attention-Deficit/Hyperactivity Disorder	Psychologists, Psychiatrists, Physicians
Physical Disabilities	Physicians, Specialists in a particular area such as Audiologists
Mental Disabilities	Psychiatrists, Psychologists, School Psychologists, Licensed Professional Counselors.

English as a second language, in the absence of a disability, is not an approved reason for accommodations.

(from *Ensuring Accommodations for GED Candidates with Disabilities, GED Testing Service*)

OTHER ACCOMMODATIONS AVAILABLE

The Chief Examiner may permit the use of the following adaptations and devices without prior approval from the GED Administrator, GED Testing Service, or GEDTS-trained and certified personnel. It is the Chief Examiner's prerogative to examine these materials to ensure that they do not contain any unauthorized testing aids.

Colored transparent overlays: These devices, which resemble tinted overhead transparencies, are widely used by persons with visual impairments and those with learning disabilities who have difficulty decoding written words and symbols.

Clear transparent overlays and highlighter: The combination of clear (untinted) overlays and a highlighter can be used with the candidate who needs to use a highlighter while reading. The highlighting takes place on the clear overlay and protects the test booklet from becoming marked. All used overlays must be collected at the end of each testing session.

Temporary adhesive (e.g., Post-It Notes) with spatial directions: Candidates can affix temporary "sticky" notes on the answer sheet to accommodate a disability affecting spatial orientation. For example, the candidate might flag the sheet for top, bottom, right, and left.

Earplugs: The candidate may use earplugs as an aid in concentration. Some large-volume or busy testing centers routinely distribute earplugs to all candidates.

Large Print Tests: The candidate may use the large print edition of the tests under normal time limits upon request to the Examiner. It is recommended that each GED Testing Center order at least one large print test battery per year for this purpose.

Magnifying Glass: The candidate may use his or her preferred type of magnifying device during test taking. If the candidate uses a magnifier during the standard testing session, the Examiner should take additional care to stagger test forms and must seat the candidate in a way that precludes other candidates from seeing his or her test materials.

One Test Per Day: Candidates may take one test per day upon arrangement with the Chief Examiner at the designated testing center.

Straightedge: Candidates may use a plain, unmarked straightedge made from any safe material as an aid in spatial orientation and reading. If the straightedge is an additional piece of scratch paper issued by the Examiner, it must be collected at the end of the testing session and destroyed with any other scratch paper.

Other Devices As Deemed Appropriate: GEDTS allows other devices without permission as long as they compensate for the disability and do not provide an unfair advantage. (from *Ensuring Accommodations for GED Candidates with Disabilities*, GED Testing Service)

FREQUENTLY ASKED QUESTIONS

Q. My student needs his scores rushed because he has a job waiting/ needs to register for school/ enlist in the military. What can he do?

A. All GED answer sheets are handled as if a job, future education, or advancement depends on getting the results in a timely manner. No preferential treatment is given in the scoring process. Answer sheets are graded at a national scoring center and are batched by test date. All examinees should know in advance that it takes 15 working days to receive GED test results.

Q. It has been more than 15 working days and my student has not received his scores. What should I do?

A. Have the student call the official GED test center where he took the test. Since examiners cannot take phone calls while they are testing, the student may have to leave a message for the examiner. **DO NOT HAVE EXAMINEES CALL THE STATE OFFICE**. The examiner has the information to solve the student's problem. If the student calls the state GED Office, staff must often consult with the examiner to get the necessary information. This holds up the answer for the student and slows down processing time for issuing transcripts and diplomas.

Q. The test center says my student's test has been graded and mailed to him. Why has he still not received it?

A. Has the student moved since he filled out his address on the demographic form? Many GED diplomas and transcripts are returned because examinees have entered incorrect address information or move before the results are printed. Have the student confirm his address with the GED test center where he tested. The examiner at the test center can make the correction. Advise students to use a permanent address on the demographic form.

Q. My student needs results now. Can the examiner give him a copy? Can I give him a copy?

A. Test centers do not give out score information. Only the state office can issue official transcripts and diplomas. Adult education programs are provided access to student scores through AERIN. These scores are provided to help the programs with instruction, not to provide students with score information.

Q. You misspelled my student's name on the diploma. Can it be fixed?

A. The student enters the name on the demographic form and each answer sheet. If the name is misspelled, it is because the student entered it incorrectly. The diploma and transcript with the incorrect name must be turned in to the examiner at the official GED test center where the student tested before a corrected diploma and transcript can be issued.

Q. My student has married/divorced and wants to change the name on their GED diploma and transcript. How is this done?

A. The name on the transcript/diploma is the legal name entered by the student at the time they tested. Name changes will not be made to the official GED record for marriage/divorce or other legal action.

Q. I have a student from another state. Can that student test in Kentucky?

A. In order to be awarded a diploma from Kentucky, a student must have a Kentucky address.

Q. I have a student who tested in another state and moved to Kentucky. What does the student need to test in Kentucky?

A. The student needs a completed KYAE-6, a completed demographic form, proof of eligibility, government-issued photo ID, and an official copy of results from the state where the student tested. The student must pass the Official Practice Test on any subject not already passed.

Q. I have a student without a Social Security number. Can that student test?

A. A student does not have to have a Social Security number, or even be a US citizen to take the GED test. The student must meet the Kentucky eligibility requirements. If a student does not have a Social Security number, KYAE funded providers should give the student the same number the adult educator used for AERIN enrollment. The student must enter this number on the demographics form and answer sheets in place of the social security number. This will allow the adult education center to access the student's scores through AERIN. The student should indicate on the demographics and answer sheets that this is a "Jurisdiction" code rather than Social Security Number. If you are not a KYAE funded program, bubble KY5, county code of residence (3 digits), birth month and day of student. The test center will be able to access the student record by name and birth date.

Q. A parent called me wanting their precocious 15 year old to take the GED test so she can enter college. What do I do to get special permission for that student?

A. No one younger than 16 years old can take the GED Tests. That is a GED Testing Service policy.

Q. My student is retesting. Do I need to give the student a new KYAE-6 form each time the student tests?

A. No. The student should tell the examiner at pre-registration that he is retesting. The student should bring a copy of his previous scores to the examiner. The student should retake the Official Practice Test on non-passing subjects before retesting.

Q. I know everyone won't show up on test day. Why can't I send over extra students on test day to fill in for no-shows?

A. In Kentucky there is a pre-registration policy for the GED tests. The GED tests are tied to individual examinees. The examiners may only take the number of batteries to the testing room as students pre-registered. Each student is assigned a test in advance.

Q. I know an examiner in another county. Can I get them to come to my center and test?

A. A test center can only test at approved sites listed on their contract with GEDTS. If you want your county to be considered as an addendum site you must establish need and make a commitment to support the test center. The state GED office must approve the new site and it has to be filed with GED Testing Service in Washington DC before any testing can occur.

Q. The examiner told me I would have to pay their mileage and that I would have to guarantee a certain amount in test fees before they would come to my county. Is that legal?

A. Since test centers receive no funding for GED testing, an addendum site is typically asked to guarantee a certain amount of revenue for each test date so the Official Test Center can cover expenses for the test session. Often the addendum site is asked to pay mileage for the examiner to travel to the addendum site and pay either a per-session fee or guarantee a minimum amount in test fees. The sponsoring institution for a test center (usually a Board of Education, Community or Technical College) cannot be expected to subsidize testing for an entire region. All Official GED Test Centers are encouraged to have a written agreement with each addendum site spelling out what services the test center will provide and what compensation the addendum site must provide.

Q. I have a student with a note from his doctor that says he needs to take frequent breaks during the test. He took it to the examiner, but the examiner would not honor it. Why?

A. The student must file for special accommodations on the appropriate form and have it approved in advance before any accommodations can be granted. The forms are available from the test center. A test center will be closed immediately if an examiner grants special accommodations without prior approval from the state GED administrator.

Q. I have a student who needs to have test questions read to him (or must use a computer). What does he do on the GED?

A. Only certain accommodations are available on the GED. Refer to the chart of accommodations available. The GED is available on audiocassette with prior approval. No part of the GED is available on computer.

Q. My student has had an IEP (Individual Education Plan) all through school. I know he needs special accommodations. Will the IEP work as documentation?

A. Only the assessments specified by GEDTS will be accepted. See the procedures for requesting special accommodations to find the list of approved assessments. The presence of an IEP may be cited as supporting documentation.

Q. My student has passed all parts of the Official Practice Test except math. I want him to start taking the GED now and he will continue studying math while he takes the other tests. Can he do that?

A. A student must pass all five parts of the Official Practice Test before he can be admitted to the GED test. There should be an expectation that the student will be able to earn a GED before he begins testing. This is in the Kentucky eligibility regulation.

Q. I think my student will do better if he only takes one test per day. Can I schedule that way?

A. This should be the exception, not the rule. Most examinees should take all five parts of the test over the regularly scheduled test session. The Chief Examiner at the test center makes the test schedule.

Q. I have a student who has been approved for two times the regular test time. How much will it cost to take the tests?

A. All official test centers are required to provide testing to those with approved accommodations on the GED tests. The center may not charge more for accommodated testing than the standard test fee.

Q. The examiner at the test center that serves my area will not test students with special accommodations or Spanish-speaking students. What should I do?

A. Call the test center and discuss it with the chief examiner. If you cannot reach a resolution call the state GED office.

Appendix A

Please visit 785 KAR 1:130 to review the GED Eligibility Requirements.

Appendix B--Candidate completes page 1 of the KYAE-6, GED Testing Application.

KENTUCKY ADULT EDUCATION GO HIGHER

GED TESTING APPLICATION
(PLEASE TYPE OR PRINT)

Kentucky Adult Education
1024 Capital Center, Suite 250
Frankfort, KY 40601
502/573-5114
Website: http://adulted.state.ky.us/GED.htm

Note: Applicants with a documented disability may qualify for special testing accommodations. Please contact your local testing center or the adult education provider for information.

Name (Last, First, Middle Initial or Maiden Name): SMITH JOHN A. JR.

Date of Birth (Month/Day/Year): 04/24/1981

Age at application: 24

Social Security Number: 000-00-1234

Address (Street/Number/Apartment): 1024 CAPITAL CENTER DR. #250

City: FRANKFORT | State*: KY | Zip Code: 40601

Home Phone: 502/573-1498

Work Phone: 502/573-5114

*Only examinees with a Kentucky address will be issued a Kentucky diploma.

Name of last school attended: FRANKFORT HIGH SCHOOL

NCES Code: 210198000433

For NCES Code go to http://nces.ed.gov/ccd/districtsearch/.

Address of last school attended: 328 SHELBY ST.

City: FRANKFORT | State: KY | Zip Code: 40601

HIGH SCHOOL WITHDRAWAL

If applicant is less than 19 years of age, documented proof of withdrawal from public or private school must be attached to this application.

Date of withdrawal from school: ☐☐/☐☐/☐☐☐☐

Those younger than 19 must attach proof of withdrawal.

Certify the following by initialing beside each statement:

- JS **I certify I have not received a high school credential from any jurisdiction.**
- JS **I certify I have not previously earned GED scores sufficient to qualify for a high school credential in any jurisdiction.**
- JS **I certify I have read and understand the testing misconduct policy.**
- JS **I certify I have not already taken the GED tests more than twice during this calendar year.**
- JS **I authorize release of my test results to the certifying providers.**
- JS **I certify all information on this application is accurate.**

Signature of Applicant: X John A Smith Jr.

Date: 08/29/2005

This signed application must be taken to the test center for admission to testing and is good for 6 months from this date. Government issued photo identification with name, date of birth, address and signature must be taken to the test center for admission to testing.

You may need additional signatures on the back of this application to meet eligibility requirements as outlined in 785 KAR 1:130 and described on the next page of this application.

KYAE-6 Form (rev. 6/05)

Candidate must sign and date form.

Superintendent (or child program administrator where indicated) completes and signs if granting exemptions for these reasons.

COMPLETE ONLY IF YOU MEET ONE OF THESE CONDITIONS

You will need an additional signature if you meet one of the following conditions outlined in 785 KAR 1:130:

☐ 1. If you are in a juvenile detention center or juvenile holding center, you must have the signature of the local school superintendent.

☐ 2. If you are a state agency child, you must have the signature of the child program administrator.

☐ 3. If you are in the Secondary GED Program, you must have the signature of the local school superintendent.

☐ 4. If you have requested and been granted a waiver of the 90-day school withdrawal provision for one of the reasons below, you must have the superintendent (or designee) signature.

The superintendent (or designee) granting a waiver of the 90-day withdrawal provision (block 4), please check one of the following:

___Employment Condition ___ Postsecondary Enrollment ___Medical Reason ___Family Circumstance ____Other

Name of Local School District or State Agency	City	County
Print Name	Date ☐☐/☐☐/☐☐☐☐	Phone Number ☐☐☐/☐☐☐-☐☐☐☐
Authorized Signature X		

TEST READINESS CERTIFICATION

Applicants are required to be certified as test-ready by a local adult education provider. THIS FORM MUST BE COMPLETED BY AN APPROVED ADULT EDUCATION PROFESSIONAL.

This certifies the applicant has passed the Official GED Practice Test and is eligible to take the GED Test.

Signature of Adult Education Provider	Program Name	
X Donna Potter	Frankfort/KY AdultEd	
Print Name Donna Potter	Provider Code 2 2 0 3 7 2	Provider Phone Number 5 0 2/5 7 3-1 5 5 5
Number of hours spent preparing for GED Test 10	Provider E-mail donna.potter@ky.gov	

Approved adult educator completes this section.

Applicant Name (Last, First, Middle Initial or Maiden Name)

Date of Birth (Month/Day/Year)	Age at application	Social Security Number
0 4/2 4/1 9 8 1	24	0 0 0-0 0-1 2 3 4

Official Practice Test Scores

Date	Language Arts, Reading	Language Arts, Writing	Math	Science	Social Studies	Total Points	Average
8/19/2005	510	520	420	480	520	2450	490

KYAE-6 Form (rev. 6/05)

Approved adult educator enters Official Practice Test Scores and date of assessment.

Appendix B1

KENTUCKY ADULT EDUCATION GO HIGHER

GED TESTING APPLICATION
(PLEASE TYPE OR PRINT)

Kentucky Adult Education
1024 Capital Center, Suite 250
Frankfort, KY 40601
502/573-5114
Website:
http://adulted.state.ky.us/GED.htm

Note: Applicants with a documented disability may qualify for special testing accommodations. Please contact your local testing center or the adult education provider for information.

Name (Last, First, Middle Initial or Maiden Name)		
Date of Birth (Month/Day/Year) ☐☐/☐☐/☐☐☐☐	**Age at application**	**Social Security Number** ☐☐☐-☐☐-☐☐☐☐
Address (Street/Number/Apartment)		
City	State*	**Zip Code**
Home Phone ☐☐☐/☐☐☐-☐☐☐☐	**Work Phone** ☐☐☐/☐☐☐-☐☐☐☐	

*Only examinees with a Kentucky address will be issued a Kentucky diploma.

Name of last school attended	**NCES Code** ☐☐☐☐☐☐☐☐☐☐☐☐	
Address of last school attended		
City	**State**	**Zip Code**

HIGH SCHOOL WITHDRAWAL

If applicant is less than 19 years of age, documented proof of withdrawal from public or private school must be attached to this application.

Date of withdrawal from school: ☐☐/☐☐/☐☐☐☐

Certify the following by initialing beside each statement:

_____ I certify I have not received a high school credential from any jurisdiction.

_____ I certify I have not previously earned GED scores sufficient to qualify for a high school credential in any jurisdiction.

_____ I certify I have read and understand the testing misconduct policy.

_____ I certify I have not already taken the GED tests more than twice during this calendar year.

_____ I authorize release of my test results to the certifying providers.

_____ I certify all information on this application is accurate.

Signature of Applicant X	Date ☐☐/☐☐/☐☐☐☐

This signed application must be taken to the test center for admission to testing and is good for 6 months from this date. Government issued photo identification with name, date of birth, address and signature must be taken to the test center for admission to testing.

You may need additional signatures on the back of this application to meet eligibility requirements as outlined in 785 KAR 1:130 and described on the next page of this application.

COMPLETE ONLY IF YOU MEET ONE OF THESE CONDITIONS

You will need an additional signature if you meet one of the following conditions outlined in 785 KAR 1:130:

☐ 1. If you are in a juvenile detention center or juvenile holding center, you must have the signature of the local school superintendent.

☐ 2. If you are a state agency child, you must have the signature of the child program administrator.

☐ 3. If you are in the Secondary GED Program, you must have the signature of the local school superintendent.

☐ 4. If you have requested and been granted a waiver of the 90-day school withdrawal provision for one of the reasons below, you must have the superintendent (or designee) signature.

The superintendent (or designee) granting a waiver of the 90-day withdrawal provision (block 4), please check one of the following:

___Employment Condition ___ Postsecondary Enrollment ___Medical Reason ___Family Circumstance ____Other

Name of Local School District or State Agency	City	County
Print Name	Date ☐☐/☐☐/☐☐☐☐	Phone Number ☐☐☐/☐☐☐-☐☐☐☐
Authorized Signature X		

TEST READINESS CERTIFICATION

Applicants are required to be certified as test-ready by a local adult education provider. THIS FORM MUST BE COMPLETED BY AN APPROVED ADULT EDUCATION PROFESSIONAL.

This certifies the applicant has passed the Official GED Practice Test and is eligible to take the GED Test.

Signature of Adult Education Provider X	Program Name	
Print Name	Provider Code ☐☐☐☐☐☐	Provider Phone Number ☐☐☐/☐☐☐-☐☐☐☐
Number of hours spent preparing for GED Test_____	Provider E-mail	

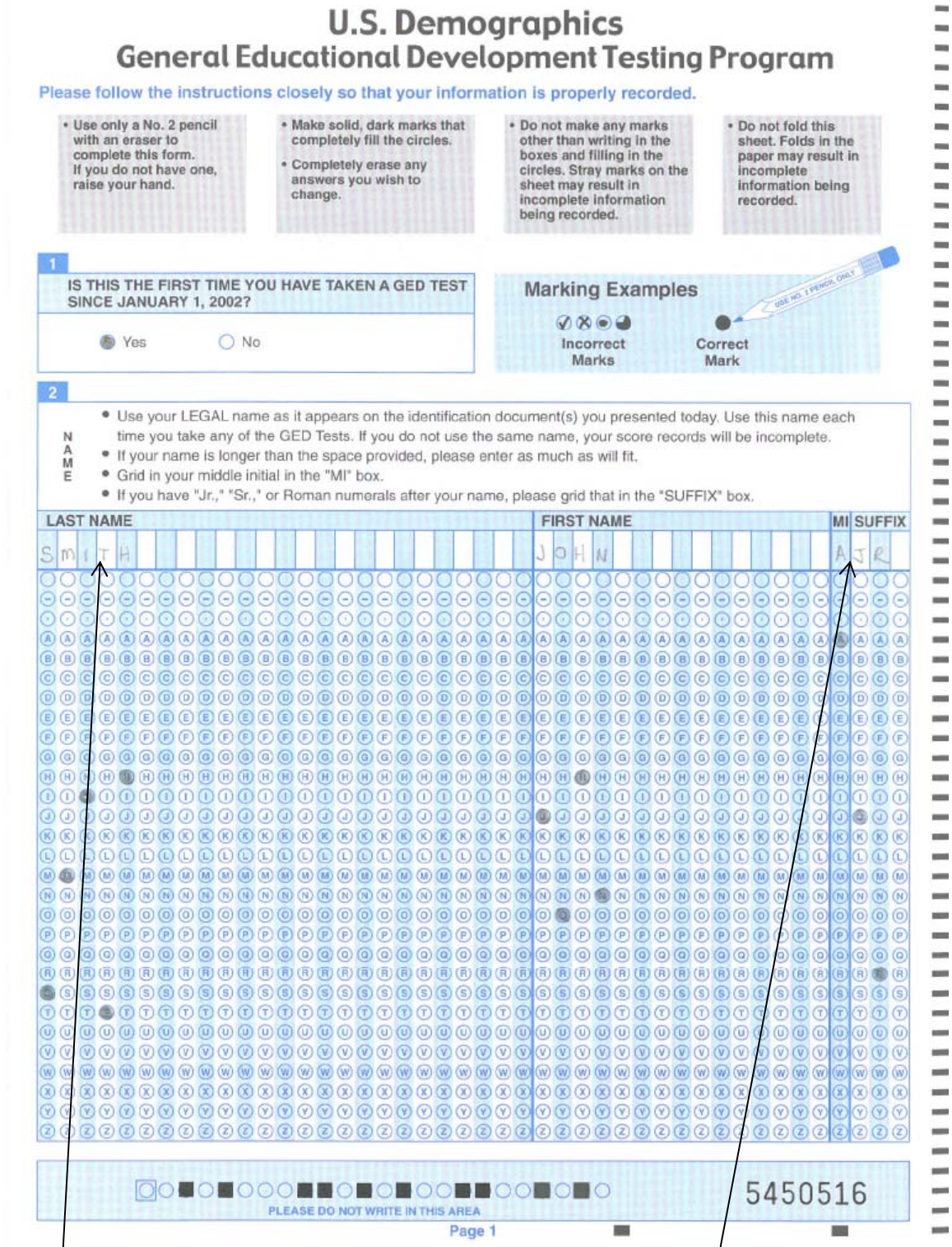
Applicant Name (Last, First, Middle Initial or Maiden Name)

Date of Birth (Month/Day/Year)	**Age at application**	**Social Security Number**
☐☐/☐☐/☐☐☐☐		☐☐☐-☐☐-☐☐☐☐

Official Practice Test Scores

Date	Language Arts, Reading	Language Arts, Writing	Math	Science	Social Studies	Total Points	Average

Appendix C



U.S. Demographics
General Educational Development Testing Program

Please follow the instructions closely so that your information is properly recorded.

- Use only a No. 2 pencil with an eraser to complete this form. If you do not have one, raise your hand.
- Make solid, dark marks that completely fill the circles.
- Completely erase any answers you wish to change.
- Do not make any marks other than writing in the boxes and filling in the circles. Stray marks on the sheet may result in incomplete information being recorded.
- Do not fold this sheet. Folds in the paper may result in incomplete information being recorded.

1 IS THIS THE FIRST TIME YOU HAVE TAKEN A GED TEST SINCE JANUARY 1, 2002?

Yes No

Marking Examples

Incorrect Marks

Correct Mark

USE NO. 2 PENCIL ONLY

2 NAME

- Use your LEGAL name as it appears on the identification document(s) you presented today. Use this name each time you take any of the GED Tests. If you do not use the same name, your score records will be incomplete.
- If your name is longer than the space provided, please enter as much as will fit.
- Grid in your middle initial in the "MI" box.
- If you have "Jr.," "Sr.," or Roman numerals after your name, please grid that in the "SUFFIX" box.

LAST NAME: SMITH

FIRST NAME: JOHN

MI: A

SUFFIX: JR

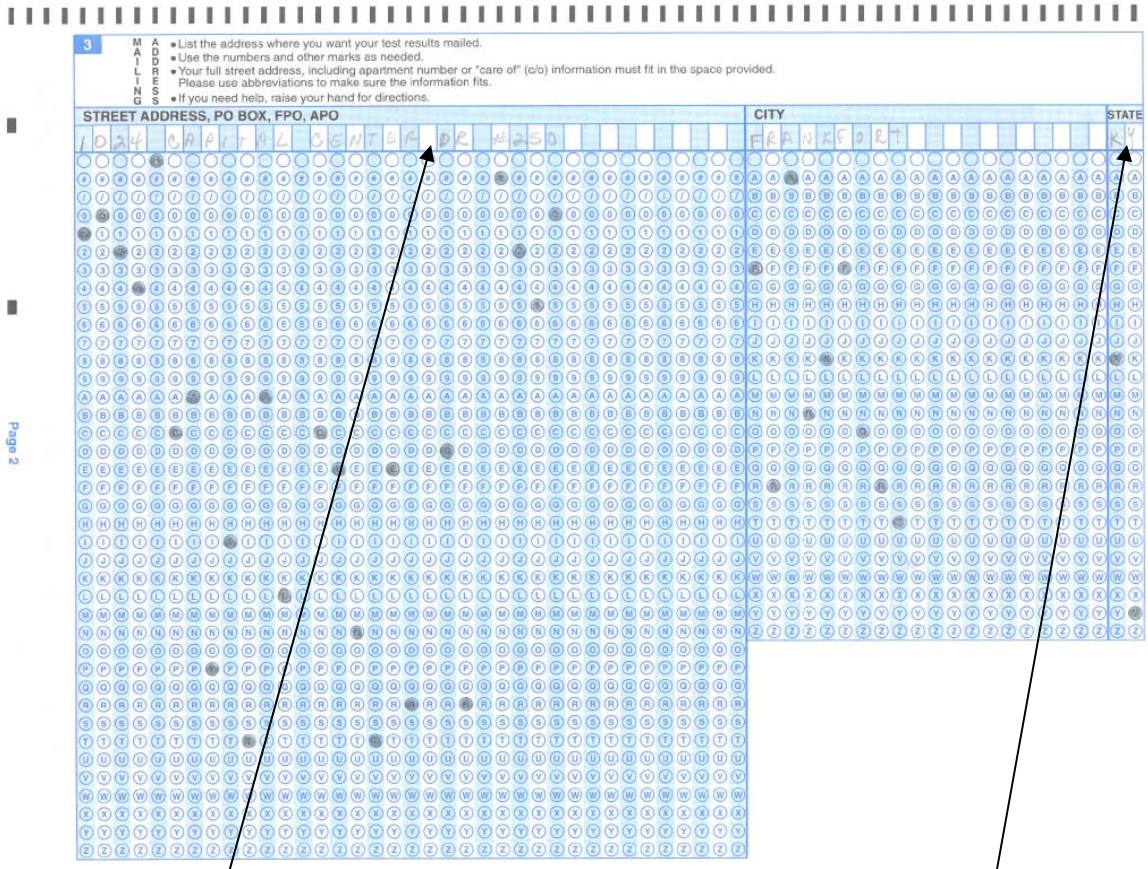
5450516

PLEASE DO NOT WRITE IN THIS AREA

Page 1

Must use legal name.

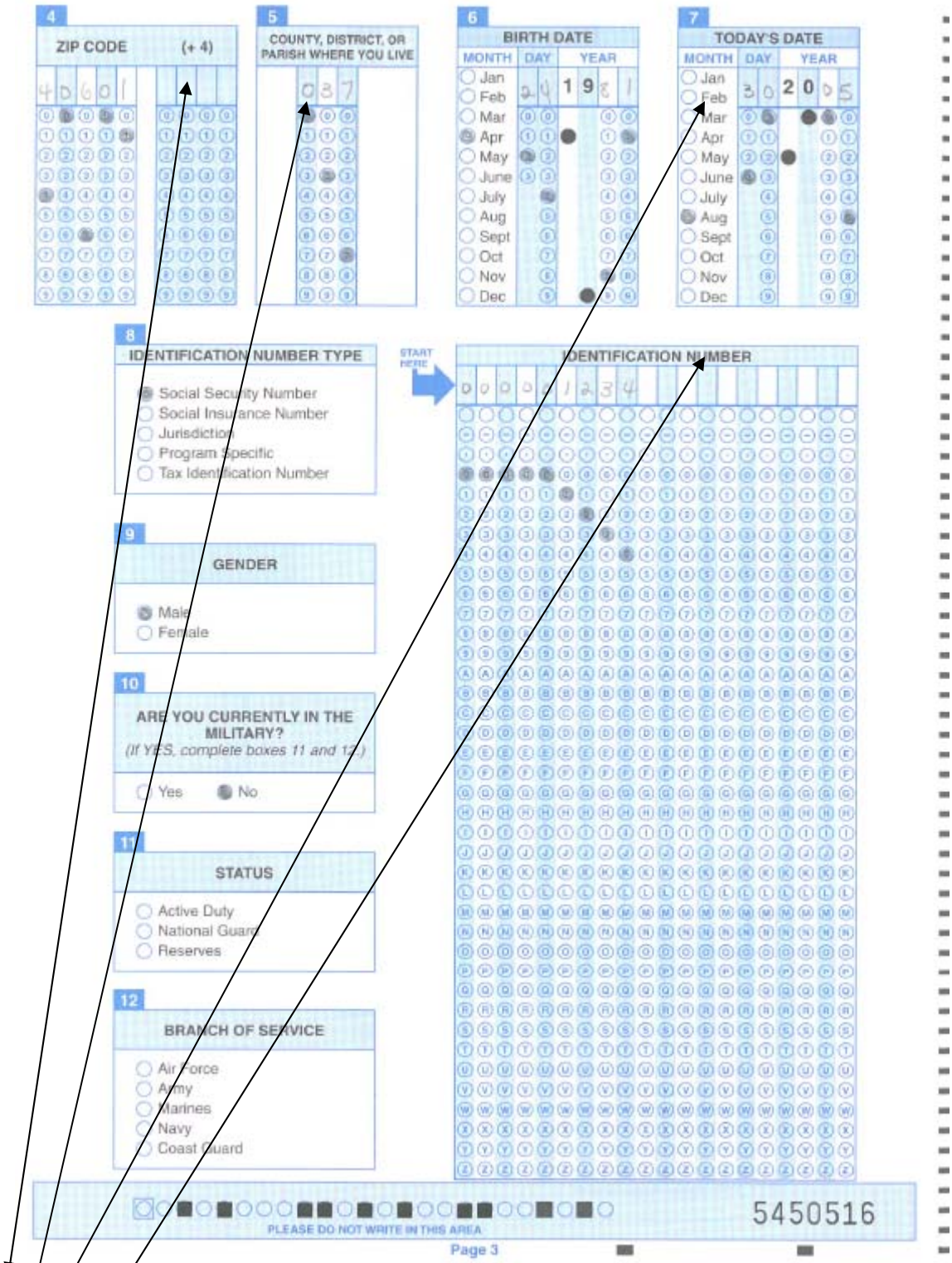
Jr., Sr., or III--do not put Mr., Mrs., or Ms.



3. Put spaces between the words in the address.

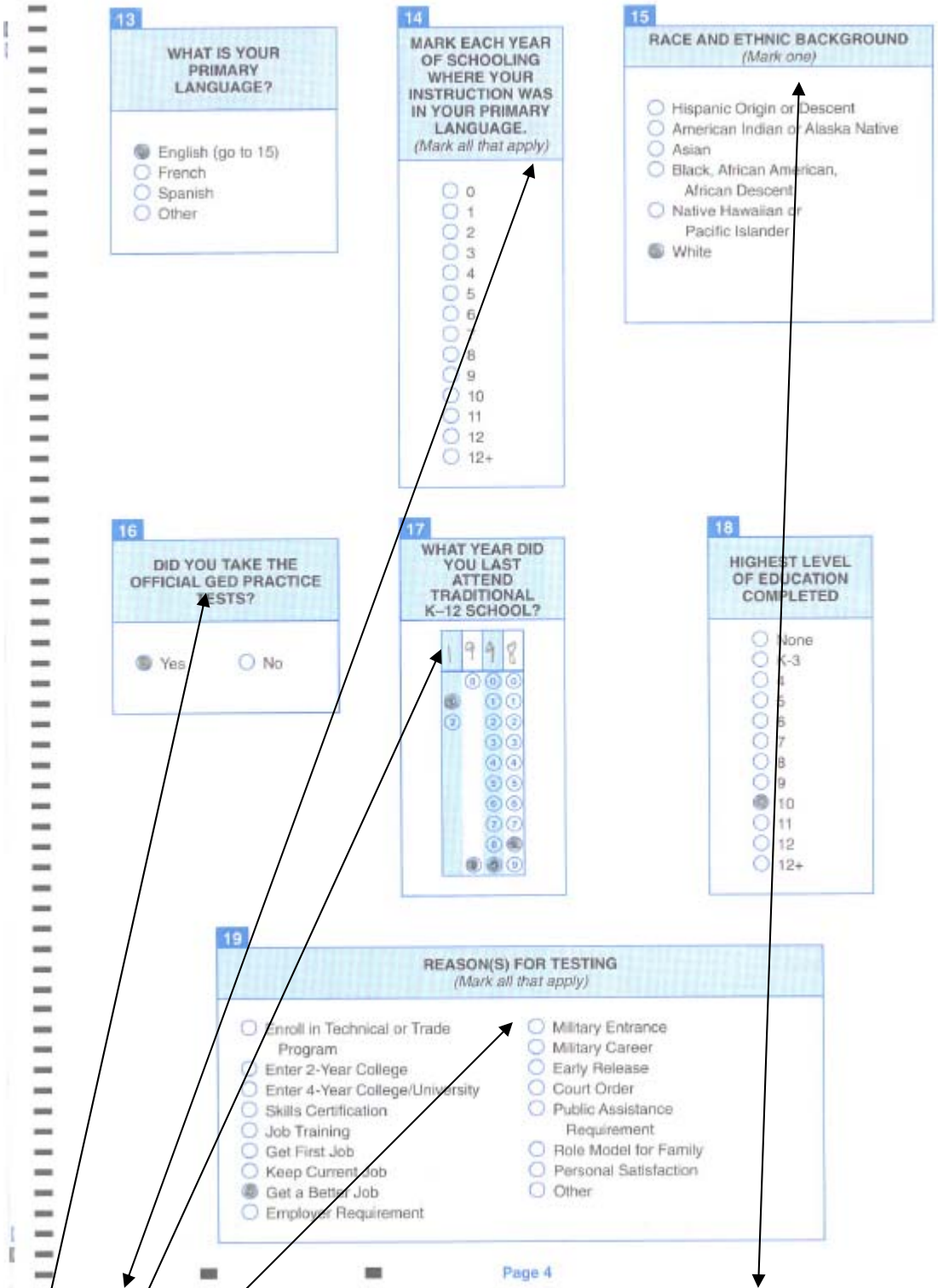
Must have a Kentucky address.

This address is where the diploma and transcript will be mailed.



4. If examinee does not know plus four (+4) of zip code, leave last four digits blank. Do not enter four zeroes.
5. Code for the county where the examinee lives.
7. Test Date.
8. Mark Social Security Number. If an examinee does not have a SSN, bubble "Jurisdiction." Enter the number assigned for AErin enrollment.

KYAE-6 Form (rev. 6/05)



14. Bubble in all grades until they reach the last appropriate year. 15. Mark only one.
16. If the examinee attended an adult education program in KY the answer is yes.
17. Make a "best estimate" guess if out of school for a number of years.
19. Mark the most appropriate answer.

20 YOUR CURRENT STATUS
(Mark all that apply)

- ● Employed Part-time (20 or fewer hours per week)
- ○ Employed Full-time
- ○ Unemployed (seeking employment)
- ○ Permanent Disability
- ○ Not in the Labor Force (unemployed by choice)
- ○ Not in the Labor Force (homemaker, family caregiver)
- ○ Retired
- ○ Full-time Student
- ○ Part-time Student

21 WHAT WAS THE TOTAL AMOUNT YOU EARNED LAST YEAR?

- ○ $0
- ○ $1 to $3,000
- ○ $3,001 to $5,000
- ● $5,001 to $7,500
- ○ $7,501 to $10,000
- ○ $10,001 to $15,000
- ○ $15,001 to $20,000
- ○ $20,001 to $25,000
- ○ $25,001 to $30,000
- ○ $30,001 to $40,000
- ○ More than $40,000

22 INDICATE ALL THAT APPLY AT THE TIME OF TESTING.

Status

- ○ Correctional Facility
- ○ Health Facility
- ○ Receiving Public Assistance
- ● Single Parent
- ○ Emancipated Minor

23 HOW FAR DID YOU TRAVEL IN ONE DIRECTION TO TAKE THE GED TESTS?

- ○ 1 to 10 miles
- ● 11 to 25 miles
- ○ 26 to 50 miles
- ○ 51 to 100 miles
- ○ More than 100 miles

24 WERE YOU ABLE TO TAKE THE GED TESTS WHEN YOU CHOSE?

- ○ Yes
- ○ Waited 1 week
- ● Waited 1 week to 1 month
- ○ Waited longer than 1 month

25 DID YOU PAY FOR YOUR TEST PREPARATION YOURSELF?

- ○ Yes
- ● No

26 HOW DID YOU FIRST LEARN ABOUT THE GED TESTS?
(Mark all that apply)

- ● Friend, neighbor, or family member
- ○ Classmate
- ○ School guidance counselor or teacher
- ○ Television
- ○ Radio
- ○ Magazine
- ○ Newspaper
- ○ Brochure, pamphlet, or poster
- ○ Employer
- ○ Employment counselor
- ○ Education agency
- ○ Jail or prison official
- ○ Probation or parole officer
- ○ Military recruiting officer
- ○ Social worker
- ○ Other

27 HOW MANY HOURS DID YOU SPEND PREPARING FOR THE GED TESTS?

Page 5

20. Mark the most appropriate answer. 21. If an examinee is uncomfortable with this question, refer them to question 50 on page 8. This info. Is used for research purposes. 26. Mark the most appropriate answer. 27. Justify to the left. Provide info. from 1/1/2002 only. Should be the same info. Entered on the back of the KYAE-6 form.

28

HOW DID YOU PREPARE FOR THE GED TESTS?
(Mark all that apply)

- ○ Public School Adult Education Class
- ● Community College Adult Education Class
- ○ Television
- ○ Internet/Computer
- ○ Distance Learning
- ○ Correspondence School
- ○ Charter School
- ○ Home Study
- ○ Homeschooling Instead of K–12
- ○ Official Practice Tests
- ○ Correctional Facility
- ○ Family Literacy
- ○ Library
- ○ Workplace Literacy Program
- ○ Community Based Organization
- ○ Army "GED Plus"
- ○ Project Challenge
- ○ GED Option
- ○ Homeless Program
- ○ Military Installation
- ○ Church Program (Faith-based)
- ○ Migrant Worker/HEP Program
- ○ Job Corps
- ○ Private Tutor
- ○ Literacy Volunteer Program
- ○ Employment and/or Training Program
- ○ Self-Taught
- ○ NONE

29

For each of the following subject areas (A-E), darken the circle indicating the total years (or equivalent) of study you have completed from the 9th grade until you completed your schooling. Do not count a repeated year of the same course as an additional year of study. Then, for each subject area, darken the circle that BEST describes the grades you received in that subject. If your grades were mostly A (90-100) darken A, if your grades were mostly B (80-89) darken circle B, if your grades were mostly C (70-79) darken circle C, if your grades were mostly D (60-69) darken circle D, and if your grades were mostly below D (less than 60) darken circle E. If you did not take a course in one of the subject areas, leave the grade for that area blank.

A-ENGLISH/LITERATURE
- ○ One year or less
- ○ Two years
- ○ Three years
- ○ Four years or more

GRADES Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

B-COMPOSITION
- ○ One year or less
- ○ Two years
- ○ Three years
- ○ Four years or more

GRADES Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

C-SOCIAL STUDIES
- ○ One year or less
- ○ Two years
- ○ Three years
- ○ Four years or more

GRADES Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

D-SCIENCE
- ○ One year or less
- ○ Two years
- ○ Three years
- ○ Four years or more

GRADES Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

E-MATHEMATICS
- ○ One year or less
- ○ Two years
- ○ Three years
- ○ Four years or more

GRADES Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

MARK ONLY ONE GRADE IN EACH SUBJECT AREA

5450516

PLEASE DO NOT WRITE IN THIS AREA

Page 6

28. Mark the most appropriate answer.

29. No longer needs to be completed (effective January 2005).

30

For each of the following subject areas, darken the circles indicating each of the courses you have taken, from the 9th grade until you completed your schooling.

ENGLISH/LITERATURE
- ◯ Literature (American, Canadian, Spanish, French or Other)
- ◯ English Literature
- ◯ World Literature
- ◯ Grammar/Composition

LANGUAGES
- ◯ Spanish
- ◯ French
- ◯ German
- ◯ Latin
- ◯ English
- ◯ Other

SCIENCE
- ◯ Biology
- ◯ Chemistry
- ◯ Earth Science
- ◯ General Science
- ◯ Genetics
- ◯ Physical Science
- ◯ Physics
- ◯ Zoology/Botany

SOCIAL STUDIES
- ◯ Behavioral Science (Soc., Psych., Anthro., etc.)
- ◯ Civics
- ◯ Economics
- ◯ Geography
- ◯ Political Science
- ◯ History (U.S., Canadian)
- ◯ World History

MATHEMATICS
- ◯ Algebra I
- ◯ Algebra II
- ◯ Business Math
- ◯ Calculus
- ◯ General Math
- ◯ Geometry
- ◯ Trigonometry

31

The following list of reasons for not completing high school are true for some people. Please darken the circles by the reasons that were true for you. *(Mark all that apply)*

FAMILY
1. ◯ Was needed at home to care for family members
2. ● Got a job
3. ◯ Needed money to help out at home
4. ◯ Job took too much time
5. ◯ Got married
6. ◯ Family moved too often
7. ◯ Personal/family illness
8. ◯ Got pregnant/made someone pregnant
9. ◯ Parents did not support my education
10. ◯ Lacked a good place to study at home
11. ◯ Didn't have enough money to go to school
12. ◯ Other family members did not complete high school

SOCIAL
13. ◯ Too old for my grade
14. ◯ Had emotional problems
15. ◯ Had problems with alcohol
16. ◯ Had problems with drugs
17. ◯ Did not feel part of the school
18. ◯ Did not feel safe at school
19. ◯ Did not get along with other students
20. ◯ Did not get along with teachers
21. ◯ Had problems with the law/police
22. ● Social life was more important than school work
23. ◯ School official told me to leave
24. ◯ Wasn't happy in school
25. ◯ Got suspended/expelled

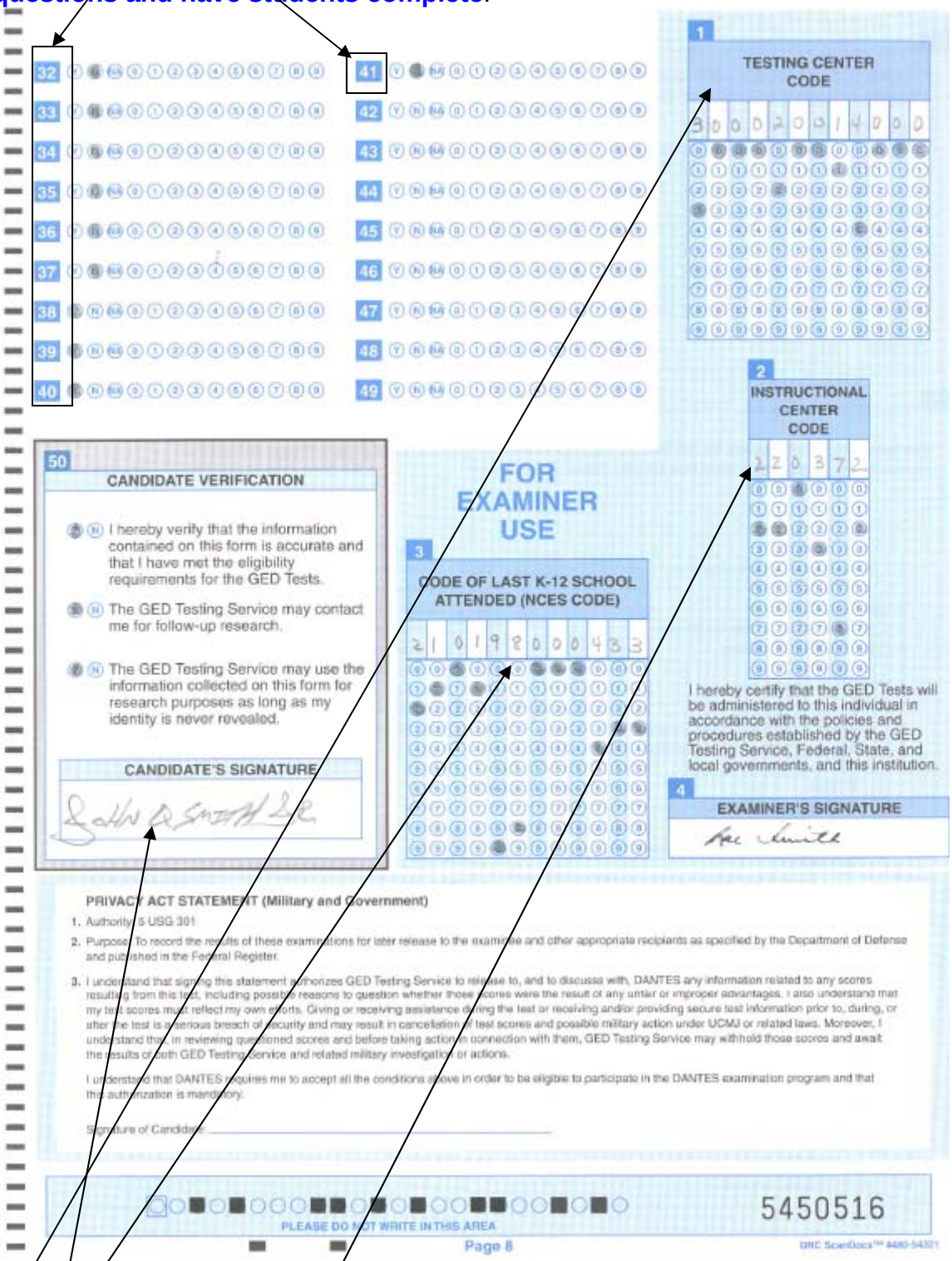
ACADEMIC ENVIRONMENT
26. ◯ Couldn't work and study at the same time
27. ◯ Poor teaching
28. ◯ School did not offer the courses I wanted
29. ◯ Not enough vocational/technical courses
30. ◯ Teachers did not help me enough
31. ◯ School work was too easy
32. ◯ Could not adjust to school routine
33. ● Did not like school
34. ◯ Was bored

STUDENT PERFORMANCE
35. ● Had trouble with math
36. ◯ Had trouble with reading
37. ◯ Poor grades
38. ◯ Poor test scores
39. ◯ School work was too hard
40. ◯ Homework was too hard
41. ◯ Poor study habits
42. ◯ Had trouble understanding the English language
43. ◯ Was absent too many times

30. No longer needs to be completed (effective January 1, 2005).

31. Mark the most appropriate answer in each section.

Questions 32 through 41 are specific for Kentucky. See attached sheet of questions and have students complete.



1. Identifies the individual test center. Get the code from the test center or let the test center complete. 2. Enter six-digit code assigned to providers authorized to administer the Official Practice Test.
3. Code can be found at http://nces.ed.gov/ccd/districtsearch/. Leave blank if home schooled or not in USA.
50. Examinee must answer the three questions and sign in the box.

KYAE-6 Form (rev. 6/05)

Appendix C1

Instructions and Kentucky Questions for Completing Demographic Form

The demographic form will be scanned. The scanner reads the bubbles. If you print your name, address, etc. correctly in the blocks provided, but do not bubble the correct letter or number, your record will not be accurate. This results in delays, duplicate records, and other problems. CHECK WHAT YOU BUBBLE.

USE A PERMANENT KENTUCKY ADDRESS. If your address is incorrect, you move, or the mail is undeliverable, you will not receive your results. Use an address that has had the same occupant for a long time. Consider using the address of your parents, grandparents, or the adult education center to ensure delivery of your results.

If you do not understand a question or the instructions, please ask the adult education provider or the test examiner.

Questions 19, 20, 26, and 28 ask you to mark all that apply. However, please mark only the most appropriate answer.

You do not need to respond to ***Questions 29 and 30***.

Question 31 has four sections and asks you to mark all that apply. However, please mark only the most appropriate response in each section.

Questions 32-41 are not printed on the demographic form. Please bubble **YES** or **NO** beside each question number on the demographic form.

Questions 32-37 will be used for data analysis to help programs improve instruction.

Question 32. Are you enrolled in the GED Secondary Program?

Question 33. Are you enrolled in a job corps program?

Question 34. Are you enrolled in Kentucky Youth ChalleNGe Academy?

Question 35. Are you classified as a state agency child?

Question 36. Are you housed in a juvenile detention facility?

Question 37. Are you a participant in a Workforce Investment Act (WIA or KWIB) Program?

Questions 38-41 give your permission to be contacted about educational and job opportunities.

Question 38. May your name, address, and pass status be provided to Kentucky colleges and universities?

Question 39. May your name, address, and pass status be provided to Kentucky Higher Education Assistance Authority?

Question 40. May your name, address, and pass status be provided to Kentucky state agencies and employers working through the state to fill positions and/or create jobs?

Question 41. May your name, address, and pass status be provided to the Kentucky National Guard?

Appendix D

Provider (Instructional Center) Codes

The provider (instructional center) code is entered in the following two places:

- Demographics Form, page 8, Item 2.
- KYAE-6 GED Testing Application, Test Readiness Certification, page 2.

The Official Practice Test has been required by regulation since 1995. At that time each provider was assigned a test readiness provider code. Effective July 1, 2005, KYAE reassigned the provider codes for consistency and data analysis. The new code is a six-digit number based on the type of program issuing the test readiness certification and the county. Here is a summary of the new provider codes:

Code	Test Readiness Certified by
22+county code+ 2	KYAE County Programs
33+county code+ 3	KYAE Statewide Programs
44+county code+ 4	GED Secondary Program
55+county code+ 5	State Correctional Programs
66+county code+ 6	Juvenile Detention Programs
77+county code+ 7	AE Providers with no KYAE Funding
88+county code+ 8	KET
99+county code+ 9	Job Corps Programs

Attached is a list of codes and the authorized signatures on file with our office. Please contact B. J. Helton, bj.helton@ky.gov if the authorized signature for your program has changed or is missing.

Juvenile detention, KET, and Job Corps provide adult education services without KYAE funding. Entities that do not receive KYAE funding to provide services, but desire to administer the OPT for test readiness certification must submit a written request annually for this designation.

If a non-funded provider is using your test readiness code, you must be providing the OPT service before entering as assessment only.

KYAE COUNTY PROGRAMS				
COUNTY CODE	COUNTY	PROGRAM NAME	FUNDED PROVIDER	AUTHORIZED SIGNATURE
1	ADAIR	Adair Co Adult Ed and Literacy	220012	Betty Todd
2	ALLEN	Allen Co Adult Education	220022	Barbara Richards
3	ANDERSON	Anderson County Adult Educ	220032	Ann Asbury, Garnetta Barnette, Stacey King, Jennifer Brown
4	BALLARD	Ballard Co Adult Education	220042	Marlene Fraser
5	BARREN	Barren Co Adult Education	220052	Judy Boston
6	BATH	Bath County Board of Education	220062	Regina French or Juanita Fay Goldy
7	BELL	Southeast Community College	220072	Millard Robbins
8	BOONE	Boone Co. Adult Education	220082	Pamela J. Hatton
9	BOURBON	Bourbon Co Adult Learning Ctr	220092	Lisa Farmer, Phyllis Courtney, Ann Stewart
10	BOYD	Ashland Ind	220102	Joan Flanery
11	BOYLE	Danville Adult Education	220112	Charlotte Preston
12	BRACKEN	Bracken County for Literacy	220122	Sheri Holleran
13	BREATHITT	Breathitt Co Adult Educ	220132	S. J. Hollon
14	BRECKINRIDGE	Cloverport Independent	220142	Julie Melton
15	BULLITT	Bullitt County Adult Education	220152	Jim Boswell
16	BUTLER	Butler Co Adult Ed & Family Lit	220162	Kimberly Akers
17	CALDWELL	Caldwell County Adult Education	220172	Jeri Hooks

18	CALLOWAY	Calloway Co Adult Education	220182	Anica Smith
19	CAMPBELL	Newport Adult Learning Ctr	220192	Elaine Kerley
20	CARLISLE	Carlisle Co Adult Education	220202	Kim Crider
21	CARROLL	Carroll County Adult Ed	220212	Lisa Stethen
22	CARTER	Olive Hill Adult Learning Ctr	220222	Vicky Rose, Sara Aldridge, Rhonda Rice
23	CASEY	Casey Co Adult Education	220232	Michael LaFavers
24	CHRISTIAN	Christian Co. Adult Education	220242	Beverly E. Thomson
25	CLARK	Winchester/Clark Co Literacy Council	220252	Thomas Green
26	CLAY	Clay Co Adult Education	220262	Pat Burchell
27	CLINTON	Clinton County Adult Education	220272	Mitch Latham
28	CRITTENDEN	Crittenden Co Adult Education	220282	Tommy Highfil
29	CUMBERLAND	Mary Ann Keen Comm. Adult Ed Ctr	220292	Sherri Scott
30	DAVIESS	SkillTrain (@ Owensboro Community & Technical College)	220302	Marsha Baker
31	EDMONSON	Edmonson County Adult Educ	220312	Shaun Stice
32	ELLIOTT	Elliott Co Adult Education	220322	Dottie Fannin
33	ESTILL	Estill Co. Adult Education	220332	Mary F. Skipper
34	FAYETTE	Central Ky Tech College	220342	Kristin Tiedeman
35	FLEMING	Fleming Co Adult Education	220352	Judy Crain
36	FLOYD	Big Sandy-Prestonsburg Campus	220362	Kay Ross
37	FRANKLIN	Thorn Hill Learning Center	220372	Erin O'Donnell
38	FULTON	Fulton County Adult Education	220382	Ellen Varden (Fulton Independent)
	FULTON		220382	JoNell Powell (Fulton County)
39	GALLATIN	Gallatin Co Adult Education	220392	Katia Zuniga
40	GARRARD	Garrard Co Adult Education	220402	Deronda Sears
41	GRANT	Grant Co. Adult Education	220412	Amelia Cloud
42	GRAVES	Mayfield/Graves Co Adult Ed	220422	Vicki Todd
43	GRAYSON	Grayson Co. Clarkson Center	220432	Bettye Jean McKinney
	GRAYSON	Grayson Co. Leitchfield Center	220432	Marge Woodard
	GRAYSON	Grayson Co. Caneyville Center	220432	Carol Mollyhorn
	GRAYSON	Grayson Co. Adult Education	220432	Charlie Crain
44	GREEN	Green County Board of Education	220442	Peggy Sharpe
45	GREENUP	Greenup County (South Shore)	220452	Debbie VanBibber
	GREENUP	Greenup County (KEDC)	220452	Beverly Waddell
46	HANCOCK	Hancock Co Adult Education	220462	Jackie Robinson
47	HARDIN	Hardin Co. Adult Education	220472	Renae Harrison
48	HARLAN	SECC/KCTCS Harlan County	220482	Brenda Morris
49	HARRISON	Harrison Co Adult Education	220492	Mike Fryman
50	HART	Hart Co Adult & Family Educ Ctr	220502	Patti Markwell
51	HENDERSON	Henderson Community College	220512	Pamala Wilson
52	HENRY	Henry Co Adult Education	220522	Michelle Davis
53	HICKMAN	Hickman Co Adult Educ and Literacy	220532	Thomas Dodson
54	HOPKINS	Madisonville CC	220542	Cris Crowley, Kristal Stanley
55	JACKSON	Jackson Co Continuing Educ	220552	Joey Neeley
56	JEFFERSON	Jefferson County Public Schools	220562	Julie Scoskie
57	JESSAMINE	Jessamine Co Adult Educ	220572	Ed Mayfield
58	JOHNSON	Mayo Technical College	220582	Jennifer Leedy
59	KENTON	Kenton Co Adult Education	220592	Peg Ramsey or Amber Decker
60	KNOTT	Knott County Adult Education	220602	Shirley Asher
61	KNOX	Knox Co Adult Education	220612	Julie Walsh
62	LARUE	LaRue Co Adult Education	220622	Sarah Hornback
63	LAUREL	Laurel Co Adult Education	220632	Kathryn Hardman
64	LAWRENCE	Lawrence Co Adulte Learning Ctr	220642	Helen Fannin, Deborah J. Webb
65	LEE	Lee County Adult Learning Center	220652	Cheryl Botner, Jennifer Bryant, Melissa

				Elkins
66	LESLIE	Leslie Co Adult Learning Ctr	220662	Flo Sizemore, Cathy Boggs, Christine Caldwell, Scott Napier
67	LETCHER	Letcher Co. Lifelong Learning	220672	Sheila Walters
68	LEWIS	Lewis County Adult Education	220682	Anne Reeder
69	LINCOLN	Lincoln County Adult Education	220692	Melissa Roth
70	LIVINGSTON	Livingston Co Adult Education	220702	Jennifer Buford
71	LOGAN	Logan Co Adult Ed	220712	Pam Morgan
72	LYON	Lyon Co Adult Education & Literacy	220722	Donald C. Foster or Naomi Bannister
73	MCCRACKEN	McCracken Co Adult Education	220732	Donna Spivey, Sandra Bowen
74	MCCREARY	McCreary Co Adult Education	220742	Beverly Murphy
75	MCLEAN	McLean Co Adult Education	220752	Dee Ann Muster
76	MADISON	Madison Co Adult Education	220762	Susan A McQuire
77	MAGOFFIN	Magoffin Co. Learning Center	220772	Brenda Minix
78	MARION	Marion Co. Adult Education	220782	John A. Sparrow
79	MARSHALL	Marshall Co Adult Learning Center	220792	Karen McLeod or Vicki Bloodworth
80	MARTIN	Martin Co Adult Educ	220802	Glendyne Marcum
81	MASON	Maysville Community College	220812	Anne Reeder
82	MEADE	Meade County Adult Education	220822	Patti Markwell
83	MENIFEE	KEDC-Menifee Co	220832	Gail Mills, Stephen Savard
84	MERCER	Harrodsburg	220842	Kerry Anness
85	METCALFE	Metcalfe Co. Adult Education	220852	Nelson Murrell
86	MONROE	Monroe Co Family Education Ctr.	220862	Sandy Moore
87	MONTGOMERY	Montgomery Co. Adult Education	220872	Louise Summers & Delores Sapp
88	MORGAN	MSU At West Liberty	220882	Linda Nickell
89	MUHLENBERG	Muhlenberg Co Bd of Ed	220892	Cris Crowley, Kristal Stanley
90	NELSON	Bardstown/Nelson Co ALC	220902	Gail Coulter, Belinda Carter
91	NICHOLAS	Nicholas Co Adult Education	220912	Janet Compton
92	OHIO	Ohio Co Adult Learning Ctr	220922	Kittye B. King, Bridgette Shadburn
93	OLDHAM	Adult Education and Fam Lit	220932	Suzette Ertel
94	OWEN	Owen Co Adult Education	220942	FaDana Bramblett
95	OWSLEY	Owsley Co Adult Education	220952	Larry J. Campbell
96	PENDLETON	Pendleton Co Adult Learning Ctr	220962	JoEllen Mitchell
97	PERRY	Appalachian Lifelong Learning Ctr	220972	Gayle Box
98	PIKE	Pike Co Adult Ed & Literacy	220982	Judith Ann Branham
99	POWELL	Powell Co Adult Ed & Lit Prog	220992	Susan Watson, Tim Brewer, Brenda Burton, & Susan Tipton
100	PULASKI	Pulaski Co. Board of Ed	221002	Tim Eaton
100	PULASKI	Somerset Ind Board of Ed	221002	Wil Searn
101	ROBERTSON	Maysville Community College	221012	Anne Reeder
102	ROCKCASTLE	Rockcastle Adult Learning	221022	Bobbie Playforth
103	ROWAN	Morehead State Univ	221032	Jenny McKinney, Eva Henderson, Opal Fannin
104	RUSSELL	Russell County Adult Education	221042	Rodney Johnson
105	SCOTT	Scott Co Adult Education	221052	Diana Waddle
106	SHELBY	Shelby Co. Adult Learning Center	221062	Patricia Ellis
107	SIMPSON	Simpson Co Adult Education	221072	Kay Drake or Chandra Drake
108	SPENCER	Spencer County Adult Education	221082	Sharon Peak
109	TAYLOR	Taylor Co. Adult Learning Center	221092	Diana Salmon
110	TODD	Todd County Adult Education	221102	Andrea Shade
111	TRIGG	Trigg Co Adult Education	221112	Terry McNichols
112	TRIMBLE	Trimble Co Adult Education	221122	Anne Gruemmer
113	UNION	Union Co Adult Education	221132	Suzan Rogers

114	WARREN	Warren County	221142	Omar Rogers, Sr.
115	WASHINGTON	Washington Co Adult Education	221152	Mary L. Lancaster
116	WAYNE	Wayne Co Adult Education	221162	William G. Roberts
117	WEBSTER	Webster Co Adult Education	221172	Ava Shade
118	WHITLEY	Whitley Co Adult Education	221182	Stephanie Temple, Sharon Cox, and Susan Dixon
119	WOLFE	KVEC	221192	Kaye Birchfield
120	WOODFORD	Woodford Co Adult Ed	221202	Tammy Bramlett
				UPDATED ON 6-30-2006

KYAE FUNDED PROGRAMS

COUNTY CODE	COUNTY	PROGRAM NAME	FUNDED PROVIDER	AUTHORIZED SIGNATURE
56	JEFFERSON	McDowell Center for Blind	330563	Roby Meadows
47	HARDIN	Bluegrass Challenge	330473	Dennis Elsey
58	JOHNSON	Carl Perkins Comprehensive Rehab	330583	Teresa Wells
				UPDATED ON 6-30-2006

CORRECTIONAL PROGRAMS

COUNTY CODE	COUNTY	PROGRAM NAME	CORRECT PROVIDER	AUTHORIZED SIGNATURE
7	BELL	BELL FORESTRY CAMP	330735	David Goodin
34	FAYETTE	BLACKBURN BRANCH CAMPUS	330343	Don PeterS
37	FRANKLIN	FRANKFORT CAREER DEV CENTER	330373	Jane Breider, Don Peters
11	BOYLE	NORTHPOINT BRANCH CAMPUS	330113	Michael Price
93	OLDHAM	LUTHER LUCKETT BRANCH	330933	Russell Grainger, Tom Qualls
93	OLDHAM	ROEDERER	330933	Katie Lokitis, Donna Feagan
93	OLDHAM	LAGRANGE	330933	Robert Atkin, Linda Beam
106	SHELBY	PEWEE VALLEY BRANCH	331063	Charles Ludwig, Rebecca Kniseley, Pamela Travis
88	MORGAN	EASTERN Kentucky BRANCH	330883	Lisa Radschweit, Karne May, Ruth Williams
72	LYON	EDDYVILLE BRANCH	330723	Cindy Dunn, Ray Fowler
89	MUHLENBERG	GREEN RIVER BRANCH	330723	Sherry Piper
72	MUHLENBERG	WESTERN KENTUCKY BRANCH	330893	Jayne Walker, Anne Farmer
78	MARION	MARION ADJUSTMENT CENTER	330783	Rebecca Wren
32	ELLIOTT	LITTLE SANDY	330323	Sarah Aldridge
36	FLOYD	OTTER CREEK	330363	
65	LEE	LEE ADJUSTMENT CENTER	330653	Joyce Begley
				UPDATED ON 6-30-2006

JOB CORPS PROGRAMS

COUNTY CODE	COUNTY	PROGRAM NAME	CORRECT PROVIDER	AUTHORIZED SIGNATURE
31	EDMONSON	GREAT ONYX JOB CORPS	990319	Marcella Vincent
36	FLOYD	CARL D PERKINS JOB CORPS	990369	Sandra Collins
74	MCCREARY	PINE KNOT JOB CORPS	990749	Tommy Brown
83	MENIFEE	FRENCHBURG JOB CORPS	990839	Anthony Wells
89	MUHLENBERG	MUHLENBERG JOB CORPS	990899	Paul Willyard

106	SHELBY	WHITNEY YOUNG JOB CORPS	991069	Amy Robertson
113	UNION	EARLE C. CLEMENTS JOB CORPS	991139	Amy Slade Ralph
				UPDATED ON 6-30-2006

KET PROGRAM

COUNTY CODE	COUNTY	PROGRAM NAME	CORRECT PROVIDER	AUTHORIZED SIGNATURE
KET 1-120	ALL	KET	88+COUNTY +8	KET Voucher
				UPDATED ON 6-30-2006

JUVENILE PROGRAM

COUNTY CODE	COUNTY	PROGRAM NAME	CORRECT PROVIDER	AUTHORIZED SIGNATURE
24	CHRISTIAN	CHRISTIAN CO DAY TREATMENT	660246	Paulette Abren
				UPDATED ON 6-30-2006

OTHER NON-FUNDED PROGRAM

COUNTY CODE	COUNTY	PROGRAM NAME	CORRECT PROVIDER	AUTHORIZED SIGNATURE
107	SIMPSON	SIMPSON COUNTY LITERACY COUNCIL	771077	Deb Thompson

GED SECONDAY PROGRAM

COUNTY CODE	COUNTY	PROGRAM NAME	CORRECT PROVIDER	AUTHORIZED SIGNATURE
42	GRAVES	GATEWAY ACADEMY HIGH SCHOOL	440424	Troy Brock
7	BELL	BELL CO GED Secondary Program	440074	Dale Hoskins
55	JACKSON	JACKSON CO GED SECONDARY PROG	440554	Jerry Vickers
57	JESSAMINE	JESSAMINE CO GED SECONDARY PROG	440574	Mary Morton, Sharon Mattmiller
90	NELSON	NELSON CO GED SECONDARY PROGRAM	440904	Janice Lantz
18	CALLOWAY	MURRAY IND. GED SECONDARY PROG	440184	Dale Reid
71	LOGAN	LOGAN CO GED SECONDARY PROGRAM	440714	Stevy Knight
63	LAUREL	LAUREL CO GED SECONDARY PROGRAM	440634	Rachel Gaynor, Patsy Hamm
	NELSON	BARDSTOWN IND GED SECONDARY PROG		Sherry Snow
83	MENIFEE	MENIFEE CO GED SECONDARY PROGRAM	440834	
100	PULASKI	SOMERSET IND. GED SECONDARY PROG	441004	Shawn Thacker
100	PULASKI	PULASKI CO IND GED SECONDARY PROG	441004	Sonya Wilds
101	ROBERTSON	ROBERTSON CO GED SECONDARY PROG	441014	Karla Allison
111	TRIGG	TRIGG CO GED SECONDARY PROGRAM	441114	Beth Sumner
	MURRAY	MURRAY IND. GED SECONDARY PROG		
	BARREN			
37	FRANKLIN	FRANKLIN CO GED SECONDARY PROG	440374	Trina Wallace
	OWEN	OWEN COUNTY GED SECONDARY PROG	440944	Charles Hagg
34	FAYETTE	FAYETTE COUNTY GED SECONDARY PROG	440344	Mark Sellers
21	CARROLL	CARROLL COUNTY GED SECONDARY PROG	44021	Mary Wiese
				UPDATED 6-30-2006

GED ESSAY SCORING

Guidelines for Holistic Scoring

1. **Read and score**. Read for an overall impression of the essay. Record your score immediately. Avoid the temptation to reread the essay to justify your score in terms of specific errors.

2. **Red pens down**. Holistic readers do not make marks on essays they score. There are two major reasons for this. First, there is no time to mark papers in this fashion. Each paper should be scored within a minute or two. Secondly, marking errors directs too much attention to one trait, while allowing the reader to ignore other positive features.

3. **Do not change your score**. Avoid second-guessing yourself. Make changes only if you made a recording error.

4. **When in doubt, refer to the scoring guide criteria**. Do not compare an essay to another essay or order essays in terms of quality. Instead refer to the scale and your internalized concept of the score points.

5. **Be aware that there can be a range of essays within a score point**. (i.e., all 2s are not created equal). There are “high”, “medium”, and “low”, essays within each score point.

6. **Avoid the tendency to adjust the number of 1s, 2s, 3s, and 4s in a given set of essays**. You may have an entire packet of 2s or 3s.

7. **Be aware of and avoid potential biasing factors**.

8. **Score only what is on the paper**. Avoid making assumptions about the writer’s potential, why the writer omitted an idea, intended bridges between concepts, etc.

9. **This in only a 45 minutes test**. Remember, candidates had only 45 minutes to read the prompt, to write a first draft, and to write the final draft. Do not compare the finished product with assignments that allow students more time to prepare.

Appendix F

The GED Essay Scoring Guide

	1	2	3	4
	Inadequate	**Marginal**	**Adequate**	**Effective**
	Reader has difficulty identifying or following the writer's ideas.	**Reader occasionally has difficulty understanding or following the writer's ideas**	**Reader understands writer's ideas.**	**Reader understands and easily follows the writer's expression of ideas**
Response to the Prompt	Attempts to address prompt but with little or no success in establishing a focus	Addresses the prompt, though the focus may shift	Uses the writing prompt to establish a main idea.	Presents a clearly focused main idea that addresses the prompt.
Organization	Fails to organize ideas.	Shows some evidence of an organizational plan.	Uses an identifiable organizational plan.	Establishes a clear and logical organization.
Development and Details	Demonstrates little or no development; usually lacks details or examples or presents irrelevant information	Has some development but lacks specific details; may be limited to a listing, repetitions, or generalizations.	Has focused but occasionally uneven development; incorporates some specific detail.	Achieves coherent development with specific and relevant details and examples.
Conventions of EAE (Edited American English)	Exhibits minimal or no control of sentence structure and the conventions of EAE.	Demonstrates inconsistent control of sentence structure and the conventions of EAE.	Generally controls sentence structure and conventions of EAE.	Consistently controls sentence structure and the conventions of EAE.
Word Choice	Exhibits weak and/or inappropriate words.	Exhibits a narrow range of word choice, often including inappropriate selections	Exhibits appropriate word choices.	Exhibits varied and precise word choice.

Appendix G

GED SAMPLE SCORE REPORT 15

INTERPRETING GED TEST RESULTS

The sample *Official Transcript of GED Tests Results* below reports sample scores for a GED test-taker.

Your performance on each of the five GED Tests is reported in two ways: as "standard scores," ranging from 200 to 800, and "percentile ranks," ranging from 1 to 99. Both scores compare your results to scores earned by a recent representative national sample of high school seniors.

Approximately 68% of all graduating seniors score between 400 and 600 on the standard score scale. Only 2% of graduating seniors score lower than 300 or higher than 700.

The **standard score** column shows the standard score you earned on each test. A standard score of 410 on each test and an average score of 450 for the five-test battery is the minimum passing standard set by GEDTS. A jurisdiction may set a passing standard that exceeds this.

The **percentile rank** column shows the percentage of graduating seniors who earned scores at or below your test scores. For example, this test-taker scored better than 97% of graduating high school seniors on the *Mathematics Test*.

GED™ **Official Transcript of GED Tests Results**

SAMPLE

Issued by
OFFICIAL GED TESTING CENTERS
of the
General Educational Development Testing Service of the American Council on Education
(For additional transcripts, contact the center below.)

Candidate's Name
Last: JONES First: THOMAS Middle Initial: P
Address: 765 Maple Lane
Gary, IN 46212
Phone Number: 315-555-7905
Date of Birth: 03/26/66 Social Security Number (if required): 734-21-9641

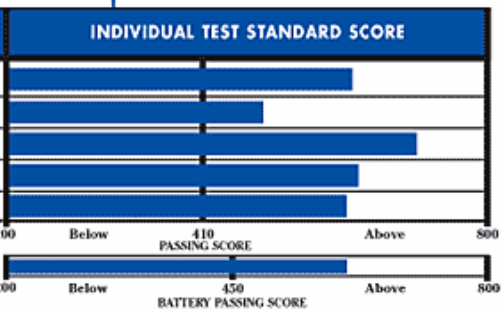
Issue Date: 02/25/2002
Test Format: EP

Reported to: GED Administrator
Division of Adult Education, IN Dept. of Education
State House
Indianapolis, IN 46204

Examiner's Signature Date
Center Name: Center Community College
Center Identification No.: 3000174208
Phone Number: 315-555-9475
Center Address: 321 Union Street
Gary, IN 46211

	TEST DATE	TEST FORM	**STANDARD SCORE	PERCENTILE RANK
Language Arts, Reading	01/17/2002	IZ	580	79
Language Arts, Writing	01/17/2002	IZ	430	28
Mathematics	01/17/2002	IZ	690	97
Science	01/17/2002	IZ	590	81
Social Studies	01/17/2002	IZ	570	76
Standard Score Total			2860	
Battery Average			572	

INDIVIDUAL TEST STANDARD SCORE



*PASS	*NON-PASS
X	

** Standard Score. The scores on this report are the highest scores achieved by the candidate and not necessarily the most recent. If retest scores are lower than scores previously achieved, the retest scores are not reported.

*Pass or Non-Pass as determined by jurisdictional policy

TOTAL BATTERY

You have demonstrated the 21st century skills of
- Communication
- Information Processing
- Problem Solving
- Higher Order Thinking

in the five test areas [Reading, Writing, Mathematics, Science, and Social Studies] to perform as effectively in the workplace or in higher education as the top 20% of traditional high school graduates.

Language Arts, Reading

Your score meets or exceeds the GED passing score requirement. You demonstrated essential reading skills in the following areas: comprehending, analyzing, evaluating, and synthesizing workplace and literary texts.

Language Arts, Writing

Your score meets or exceeds the GED passing score requirement. You demonstrated essential skills in the following areas: using the elements of standard English to edit workplace and informational documents and to generate well-organized and developed written text.

Mathematics

Your score exceeds the GED passing score requirement and the score of 80% of graduating seniors. You demonstrated superior skill in the following areas: understanding and interpreting mathematical concepts in algebra, data analysis, statistics, geometry, and number operations applied to visual and written text from academic and workplace contexts.

Science

You score meets or exceeds the GED passing score requirement. You demonstrated essential skills in the following areas: understanding, interpreting, and applying concepts of life, earth and space sciences, physics, and chemistry to visual and written text from academic and workplace contexts.

Social Studies

Your score meets or exceeds the GED passing score requirement. You demonstrated essential skills in the following areas: understanding, interpreting, and applying key history, geography, economics, and civics concepts and principles to visual and written text from academic and workplace contexts.

Standard Score Total — In this example, 2860 is the sum of all the standard scores from all the tests.

Battery Average — In this example, 572 is the average of all the standard scores from all the tests.

If your scores do not meet the required passing score, the **"NON-PASS"** box is marked.** If you have not taken all five tests, **"INC"** (incomplete) appears.

**If you do not pass, you can retake the GED Tests in order to raise your scores. The local GED Examiner can provide information about retesting. If you earn a standard score of 350 or lower, GED Testing Service generally recommends further study in those subject areas. You may also consider contacting local adult education programs for information about instructional classes.

Adults who pass the GED Tests earn scores that meet or exceed the performance of that demonstrated by 40% of graduating high school seniors. If your scores meet or exceed the required passing score, the **"PASS"** box is marked.

(from *GED Information Bulletin*, GED Testing Service)

GED Official Transcript of GED Tests Results

Issued by
OFFICIAL GED TESTING CENTERS
of the
General Educational Development Testing Service of the American Council on Education
(For additional transcripts, contact the center below.)

Candidate's Name

Last: First: Middle Initial:

Address:

Phone Number:

Date of Birth: Social Security Number(if required):

Issue Date:

Reported to:

Test Format:

Examiner's Signature Date

Center Name:

Center Identification No.:

Phone Number:

Center Address:

	TEST DATE	TEST FORM	**STANDARD SCORE	PERCENTILE RANK	INDIVIDUAL TEST STANDARD SCORE
Language Arts, Reading					
Language Arts, Writing					
Mathematics					
Science					
Social Studies					

** Standard Score. The scores on this report are the highest scores achieved by the candidate and not necessarily the most recent. If retest scores are lower than scores previously achieved, the retest scores are not reported.

		*PASS	*NON-PASS
Standard Score Total			
Battery Average			

*Pass or Non-Pass are determined by jurisdictional policy.

200 Below 410 PASSING SCORE Above 800

200 Below 450 BATTERY PASSING SCORE Above 800

TOTAL BATTERY

Language Arts, Reading

Language Arts, Writing

Mathematics

Science

Social Studies

GEDTS Form 30 - 10/01

Kentucky Adult Education, Council on Postsecondary Education
Unofficial GED Score Report -- Non-passing Results

** Standard Score. The scores on this report are the *highest* scores achieved by the candidate and not necessarily the most recent. If retest scores are lower than scores previously achieved, the retest scores are not reported.

Candidate's Name

Last: First: Middle Initial:

Address:

Phone Number:

Date of Birth: Social Security Number (if required):

Issue Date: Reported to:

Test Format:

Center Name:

Center Identification No.:

Phone Number:

Center Address:

	TEST DATE	TEST FORM	STANDARD SCORE**	PERCENTILE RANK	INDIVIDUAL TEST STANDARD SCORE	
Language Arts, Reading						
Language Arts, Writing						
Mathematics						
Science						
Social Studies						
		Standard Score Total		NON-PASS		
		Battery Average				

200 Below 450 PASSING SCORE Above 800

200 Below 450 BATTERY PASSING SCORE Above 800

TOTAL BATTERY	Language Arts, Reading	Language Arts, Writing	Mathematics

Science	Social Studies

Form KYAE-35
Revised 10/16/2003

Unofficial Copy

Appendix H

GED Transcript/Diploma Replacement Request Form

DATE: _____

Kentucky Adult Education
1024 Capital Center, Suite 250
Frankfort, KY 40601
502/573-5114 or 800/928-7323
http://adulted.state.ky.us/GED.htm

PLEASE PRINT ALL INFORMATION:	
Name (Last, First, Middle Initial or Maiden Name):	
Name you tested under if different from above:	
Social Security Number: ____ ____ ____ - ____ ____ - ____ ____ ____ ____	**Date of Birth (Month, Day, Year):** ____ ____ / ____ ____ / ____ ____ ____ ____
Date you received your GED (approximately):	**Testing Location (City / County / Job Corps / Military Location):**
Current Address (Street / PO Box # / Apartment):	
City / State / Zip Code:	
Daytime Phone Number: ____ ____ ____ / ____ ____ ____ - ____ ____ ____ ____	
Please complete the following if this request is being mailed to a different address *(attach a GED Release of Records Consent Form):*	
ATTENTION: (Name)	
Address (Street / PO Box # / Apartment):	
City / State / Zip Code:	
Daytime Phone Number: ____ ____ ____ / ____ ____ ____ - ____ ____ ____ ____	
Please check all that apply:	
__ Number of Transcripts (processing fee, $5.00 each) __ Diploma ($25.00 replacement fee, limit one) __	$_____ TOTAL AMOUNT DUE
Please be sure to include your money order, made payable to the Kentucky State Treasurer, along with this form, and mail to the above address. Personal checks are NOT accepted. INCOMPLETE REQUESTS WILL BE RETURNED TO THE APPLICANT WITH MISSING INFORMATION HIGHLIGHTED, AND ANOTHER PROCESSING FEE ASSESSED. **Requests may not be faxed or emailed to our office.**	
Signature of Applicant:	Date:
ABS STAFF USE ONLY:	
___**Walk In** ___**Mail**	**Received: $_____ Cash_____ Money Order #:_____ _____Business Check #:_____ Initials:___**
GED STAFF USE ONLY:	
Service Rendered: _____Diploma ____Transcript _____Corrections	**Date Processed:_____ Initials:___**

KYAE-6 Form (rev. 6/05)

Appendix I

KENTUCKY
ADULT EDUCATION
GO HIGHER

RELEASE OF RECORDS CONSENT FORM*

I, _____request a copy of my GED transcript be sent by the
(Print Name)

GED Office, Kentucky Adult Education to:

Person _____
(Print name)

Entity _____
(Print name of school, employer, government agency, etc.)

Address _____
_____
_____
_____

***YOU MUST ATTACH THIS SIGNED RELEASE FORM WITH YOUR GED TRANSCRIPT REQUEST IF YOU WISH FOR YOUR TRANSCRIPT TO BE SENT TO AN ADDRESS OTHER THAN YOUR OWN. OUR ADDRESS IS AS FOLLOWS:**

Kentucky Adult Education
1024 Capital Center Drive, Suite 250
Frankfort, KY 40601

Signature: _____

Social Security Number: _____

Date: _____

KYAE-6 Form (rev. 6/05)

OFFICIAL GED TEST CENTERS IN KENTUCKY

There are 48 Official GED Test Centers in Kentucky.

- **Forty-one** centers are public access centers providing GED testing at sites in **74 counties**. These centers also administer the GED test at **46 regional jails and five juvenile detention centers**.
- **Five test centers** are established to serve the **state correctional facilities** and **one test center** serves a **regional juvenile detention center**.
- The **State GED Office** (Kentucky Adult Education) is a test center for the purpose of providing special edition tests and services to the Kentucky test centers.

Adair County Board of Ed.
1204 Greensburg St.
Columbia, KY 42728
270-384-0811
also serving Barren and (Adair Youth Dev. Center)

Allen County Board of Ed.
311 North 3rd St.
Scottsville, KY 42164
270-237-4492
also serving (Allen Co. Det.)

Ashland Comm. & Tech. College
1400 College Dr.
Ashland, KY 41101
606-326-2193

Big Sandy Comm. & Tech College Mayo Campus
513 Third St.
Paintsville, KY 42140
606-789-5321 ext 82810
also serving (Otter Creek Corr. Coop, Johnson Co. Jail, Floyd Co. Jail)

Bowling Green Tech College
1845 Loop Drive
Bowling Green, KY 42101
270-901-1037
also serving (Warren Co. Reg. Jail and Warren Co. Juv. Det. Ctr.)

Breathitt Reg. Juv. Det. Center
2725 Hwy. 30 West
Jackson, KY 41339
606-295-2350

Caldwell Co. Adult Learning Center
606 W. Washington St.
PO Box 229
Princeton, KY 42445-0229
270-365-8000

Central KY Tech College
308 Vo Tech Road
Lexington, KY 40511
859-246-2400 ext 2286
also serving Clark (Fayette Co. Det. Ctr.,Clark Det. Madison Co. Det. Ctr., Bourbon Co. Det. Ctr.)

Cloverport Ind. Bd. of Ed.
PO Box 37
214 W Main
Cloverport, KY 40111
270-756-3177
also serving (Meade Co. Jail and Breckinridge Det. Ctr.)

Covington Ind. Bd. of Ed.
3618 Caroline Ave.
Covington, KY 41015
859-292-5864
also serving (Kenton Co. Det. Ctr.)

Danville High School
203 E. Lexington Ave.
Danville, KY 40422
859-238-1303

Eastern KY University
521 Lancaster Ave.
Perkins 201
Richmond, KY 40475
859-622-2306 & 1281

Edmonson Co. Bd. of Ed.
100 Wildcat Way
PO Box 129
Brownsville, KY 42210
270-597-2101
also serving Butler and Great Onyx Job Corps (Grayson Co. Det. Ctr.)

Elizabethtown Community and Technical College
600 College St. Road
Elizabethtown, KY 42701
270-706-8482
also serving Bluegrass Challenge Academy (Hardin Co. Jail and Larue Co. Jail)

Estill Co. Bd. of Ed.
253 Main St.
PO Box 930
Irvine, KY 40336
606-723-2181 or 606-723-7323

Frankfort/Franklin Co. Comm Ed
700 Leslie Ave.
Frankfort, KY 40601
502-875-1481
also serving Carroll, Owen, and Scott (Franklin Co. Reg. Jail, Scott Co. Det. Ctr.)

Hazard Comm. College
One Comm. College Dr.
HWY 15 South
Hazard, KY 41701
606-436-5721
also serving Breathitt, Knott, Letcher, Owsley and Wolfe.

Henderson Community College
2660 South Green St.
Henderson, KY 42420
270-827-1867
also serving Earl C. Clements Job Corps (Henderson Co. Det. Ctr)

Hopkinsville Community College
720 North Drive
PO Box 2100
Hopkinsville, KY 42240
270-886-3921 ext 6201 or 6204
also serving (Christian Co. Jail)

Jackson Co. Bd. of Ed.
PO Box 217
HWY 421 S
McKee, KY 40447
606-287-7181
also serving (Clay Co. Det.)

Jefferson Technical College
727 West Chestnut St.
Louisville, KY 40203
502-213-4188
also serving Jeff Tech-Southwest and (Louisville Metro Jail)

Jessamine Co. Adult Ed.
501 East Maple St.
Nicholasville, KY 40356
859-885-6749
also serving (Jessamine Co. Jail)

Kentucky Adult Education
1024 Capital Center Dr.
Suite 250
Frankfort, KY 40601
502-573-5114

KY Educational Dev Corp
904 W. Rose Road
Ashland, KY 41102
606-928-0205
also serving Greenup, Carter, and Menifee (Boyd Co. Jail and Greenup Detention Ctr.)

Laurel Co. GED Testing Ctr
90 Bennett Circle
London, KY 40741
606-878-9134
also serving Knox and Whitley (Laurel Reg. Juv. Det. Ctr., Laurel Co. Detention and Whitley Co. Det..)

Logan Co. Bd. of Ed.
2222 Bowling Green Road
Russellville, KY 42276
270-726-2436 or 270-726-4909

Madisonville Tech College
100 School Ave.
Madisonville, KY 42431
270-824-7009
also serving Muhlenberg (Muhlenberg Co. Jail, Hopkins Co. Jail, and Webster Co. Jail)

Maysville Community College
1755 US Hwy 68
Maysville, KY 41056
606-759-7141 ext 6123
also serving (Mason Co. Jail)

Monroe Co. Bd. of Ed.
1209 North Main St.
PO Box 10
Tompkinsville, KY 42167
270-487-5456
also serving Cumberland

Morehead State University
501A Ginger Hall
University Blvd.
Morehead, KY 40351
606-783-2526
also serving (Rowan Co. Det. Ctr.)

Morehead St. Univ. at West Liberty
1084 Hwy 7
PO Box 190
West Liberty, KY 41472
606-522-3245

Newport Ind Schools
30 W 8th St.
Newport, KY 41017
859-292-3056
also serving Boone, Pendleton and Grant (Campbell Reg. Juv. Det. Ctr., Northern KY Youth Dev. Ctr., Boone Co. Jail, Campbell Co. Jai, and Grant Co. Jail)

Ohio Valley Ed. Coop.
PO Box 1249
100 Alpine Dr.
Shelbyville, KY 40066
502-647-3533 ext 263
also serving Henry, Spencer and Whitney M. Young Job Corps (Shelby Co. Det. Ctr.)

Owensboro Technical College
1501 Frederica St.
Owensboro, KY 42301
270-686-4456
also serving Ohio (Daviess Co. Det. Ctr.)

Pike Co. Bd. of Ed.
PO Box 3097
Pikeville, KY 41502
606-433-9204

Powell Co. Bd of Ed
691 Breckinridge St.
PO Box 430
Stanton, KY 40380
606-663-3300
also serving (Three Forks Reg. Jail)

Somerset Community College
230 Airport Road
Somerset, KY 42501
606-677-4049
also serving Casey, Clinton, Garrard, Lincoln, McCreary, Wayne, and Rockcastle (Casey Co. Det. Lincoln Co. Det. Ctr., McCreary Co. Det. Ctr., Pulaski Co. Det, Ctr, Rockcastle Co. Det. Ctr.)

Southeast Community College
Harlan Campus
164 Ballpark Road
Harlan, KY 40831
606-573-1506

Southeast Community College
Middlesboro Campus
1300 Chichester Ave.
Middlesboro, KY 40965
606-242-2145 ext 2041

Southeast Community College
Whitesburg Campus
201 Long Ave.
Whitesburg, KY 41858
606-633-0279 ext 2036

Washington Co. Board of Ed
120 Mackville Hill
Springfield, KY 40069
859-336-5470
also serving Bullitt, Marion, and Nelson (Bullitt Co. Det. Ctr., Marion Co. Det. Ctr.)

West KY Community & Tech College
4810 Alben Barkley Dr.
PO Box 7380
Paducah, KY 42002
270-534-4390
also serving Calloway and Graves (McCracken Co. Jail, McCracken Reg. Juv. Det. Ctr., Marshall Co. Det. Ctr., Ballard Co. Jail)

Test Centers Serving State Correctional Facilities

KCTCS Blackburn Branch Campus
3111 Spurr Road
Lexington KY 40511
also serving Frankfort Career Dev. Ctr

KCTCS Northpoint Branch Campus
PO Box 479
Burgin, KY 40310
also serving Marion Adjustment Ctr

KCTCS West KY Branch Campus
374 New Bethel Road
Fredonia, KY 42411
also serving Eddyville
and Green River

KCTCS Eastern KY Branch Campus
200 Road to Justice
US HWY 46
West Liberty, KY 41472
also serving Lee Adjustment Ctr
and Bell Forestry Camp

KCTCS Roederer Branch Campus
3003 W. Hwy 146
LaGrange, KY 40032
also serving Luther Luckett
KY St. Reformatory
and KCIW (Pee Wee Valley)

GED RESOURCES

The Official GED Practice Tests

The Official GED Practice Test is published by
Steck-Vaughn Company
Educational Publishers
www.steck-vaughn.com

Order toll free
1-800-531-5015

The Official Practice Test is also available in **large print and audiocassette** for examinees with special needs.
A **Spanish language edition** is also available.

GED Testing Service Web site

Go to the GED Testing Service Web site, www.acenet.edu, for information about the GED tests for education and testing professionals. Visit the bookstore to order publications and brochures. Many are available at no charge except postage. Be sure to check out

- GED Information bulletin (2002) [also available in Spanish (2004)]
- College Is Possible brochure
- GED Diploma: Proof of Achievement
- Prove Yourself

KYAE Web site

Visit the Kentucky Adult Education Web site, http://kyae.ky.gov/ged/, to find GED information for both education professionals and students. Information about obtaining a duplicate transcript is provided. The Kentucky eligibility regulation and information about the KYAE-6 form can be accessed. KYAE publications and reports are also available.

Appendix L

Draft

Checklist for Completing Testing Accommodations Request Form(s)

Section 1: Checklist for GED Candidate

This checklist can be used to assist you and the Chief Examiner with properly completing the accommodations request forms. If your application is incomplete, the Chief Examiner should tell you. You do not need to submit this form with your request.

Last Name: _____ First Name: _____

Social Security or Social Insurance Number: ___-__-____

Be sure to ask the center staff any questions about any part of the documentation/request process that you do not understand.

- ❑ Obtain appropriate disability forms from the test center staff at your local GED Testing Center or online at www.gedtest.org.
- ❑ Be sure the GED Candidate section at the top of the request for accommodation form(s) is complete and accurate.
- ❑ Be sure to sign the signature line of the request for accommodation form(s). If you are under the age of 18, a parent or guardian must also sign.
- ❑ Be sure the professional diagnostician has completed all of the appropriate sections. Your advocate may assist you by copying information from your medical and/or educational records onto your request for accommodations form(s).
- ❑ Return your completed request for accommodations form(s) and all supporting documentation to the GED Chief Examiner at the testing center where you will take your test.

  Date documents returned to Chief Examiner: _____

Section 2: Checklist for GED Chief Examiner

- ❑ Provide the candidate with the appropriate accommodation request form and/or refer the candidate to www.gedtest.org.
- ❑ Provide any reasonable resources to the candidate as appropriate (e.g., information on how to complete the form, test schedules for your test center, brochures/pamphlets).
- ❑ When the candidate returns with the request form(s), review the form(s) with the candidate to be sure all information is complete and all relevant supporting documentation is attached.

  Request is not complete:

  - ❑ Return application to candidate for additional information/documentation. Provide the candidate with specific written directions for properly completing the form(s).

    Date returned: _____

    Items needed to complete the form(s).

    _____

    _____

    _____

  Request is complete:

  - ❑ Request sent to GED Administrator.

    Date sent: _____

General Educational Development (GED) Testing Service will not discriminate against candidates for testing on the basis of any legally protected characteristic, including, but not limited to, race, color, religion, sex, sexual orientation, pregnancy, marital status, physical or mental disability, age, veteran status, and national origin.

12475

Request for Testing Accommodations
Attention-Deficit/Hyperactivity Disorder

To be completed by Chief Examiners.

Candidate's Last 4 SSN/SIN

Section 1: To be completed by GED Candidate

Fill in this section completely and sign the release of information statement. Make certain all sections are completed by the appropriate professional before you return the form to the Chief Examiner at your local testing center. The Chief Examiner will review the form and let you know if additional information is required.

Last Name: _____ First Name: _____

Social Security or Social Insurance Number: ___ ___ ___ ___ ___ ___ ___ ___ ___ Birth Date: ___ / ___ / _____ (MM DD YYYY) Age: _____

Address: _____

City: _____ State/Province/Territory: _____ ZIP/Postal Code: _____

Phone Number: (_____) _____ - _____

Release of information: If you are under 18 years of age, your parent or guardian's signature is also required.

I grant permission to school officials and my healthcare provider(s) to release my education-related records and/or my medical or psychological records to the GED Testing Service and its designees in connection with my request for testing accommodations.

Candidate's Signature _____ *Parent or Guardian's Signature (if appropriate)* _____ *Date* _____

Section 2: To be completed by GED Chief Examiner

Please review the form to be certain all sections have been completed. Record the last four digits of the candidate's SSN/SIN in the top right corner of each page of this form. Missing information may delay the review of the candidate's request. Sign and date the form before sending it to your GED Administrator.

Chief Examiner Name: _____ 10-Digit Center ID #: _____

Center Name: _____

Phone Number: (_____) _____ - _____ FAX Number: (_____) _____ - _____

E-mail: _____

I have reviewed this application and confirm that it is complete.

GED Chief Examiner's Signature _____ *Date* _____

Section 3: To be completed by Professional Diagnostician or Advocate

This section must be completed by the professional diagnostician. Alternatively, an advocate may complete this section using information from the professional diagnostician's report if the professional is unavailable or documentation is currently on file with a candidate's school district. An advocate is someone other than the professional diagnostician who helps the candidate request testing accommodations. The professional's report must indicate certification or licensure. Documentation and assessment tests must include a clear diagnosis and provide information on current functional limitations that might affect the candidate's ability to take the tests under standard conditions, so that the rationale for the requested accommodation can be properly evaluated. *Documentation will be viewed as sufficiently current if it has been completed within the last 3 years.* However, older documentation will be considered if that is all that the candidate can provide without undue burden or expense.

Please indicate your role: ☐ Professional Diagnostician ☐ Advocate

Name of Professional Making Diagnosis (please print): _____

Phone Number: (_____) _____ - _____ Date of Assessment: ___ / ___ / _____ (MM DD YYYY)

Licensure or Certification: Expiration Date: ___ / ___ / _____

State/Province/Territory: _____ Number: _____ Specialty: _____

Name of Advocate (please print): _____

Relationship to Candidate (please print): _____

Phone Number: (_____) _____ - _____

Professional Making Diagnosis or Advocate's Signature: _____

Date: ___ / ___ / _____ (MM DD YYYY)

Request for Testing Accommodations
Attention-Deficit/Hyperactivity Disorder

To be completed by Chief Examiners.

Candidate's Last 4 SSN/SIN

Section 3A: Attention-Deficit/Hyperactivity Disorder

Attention-Deficit/Hyperactivity Disorder (ADHD)

To request accommodations for ADHD, the current level of impairment and resulting functional limitations must be clearly documented, as well as the history of those impairments and limitations. **Documentation must include a letter on official letterhead, signed by a psychiatrist, medical doctor, or psychologist who specializes in the diagnosis of ADHD, stating the diagnosis of ADHD and providing supporting diagnostic evidence of this disability.**

Diagnostic evidence may include a developmental history that defines symptom onset, as well as the results from a specific test of attention such as the TOVA Gordon Diagnostic Battery or the CPT (Connors' Continuous Performance Test).

Information presented must clearly document how the ADHD substantially limits the candidate's current ability to take the GED Tests under standard conditions, and identify the accommodations that are requested in light of those limitations. Further, the documentation must confirm that the ADHD symptoms are not due to other emotional/mental health factors. A DSM-IV diagnosis must be included with the certifying professional's or advocate's signature attesting to the diagnosis of ADHD.

☐ Supporting documentation on professional diagnostician's letterhead attached. (Required.)

DSM-IV Diagnosis Code: Indicate all that apply.

☐ 314.01 Attention-Deficit/Hyperactivity Disorder Combined Type

☐ 314.00 Attention-Deficit/Hyperactivity Disorder, Predominantly Inattentive Type

☐ 314.01 Attention-Deficit/Hyperactivity Disorder, Predominantly Hyperactive-Impulse Type

☐ 314.9 Attention-Deficit/Hyperactivity Disorder, Not Otherwise Specified

Functional Limitation(s): _____

_____

Recommended Accommodation(s): _____

_____

Rationale for Accommodation(s): _____

_____

12475

Request for Testing Accommodations
Attention-Deficit/Hyperactivity Disorder

To be completed by Chief Examiners.

Candidate's Last 4 SSN/SIN

Section 3B: Requested Accommodations

Please identify those accommodations that support the diagnosed disability.

☐ Extended Time (please specify): ☐ 1-1/2 times ☐ 2 times ☐ Other: _____

☐ Audiocassette (tone-indexed) (requires extended testing time, generally double time)

☐ 2 times ☐ Other: _____

The use of this accommodation requires practice. Candidates should have an opportunity to practice using an Official GED Practice Test, Audiocassette Version prior to the scheduled testing date.

☐ Braille

☐ Scribe

☐ Calculator for Part II

☐ Talking Calculator for Entire Mathematics Test

☐ Private Room

☐ Supervised Breaks (specify in minutes):

Uninterrupted testing time: _____ minutes, break time: _____ minutes

☐ Other: _____

Section 3C: Other Information and Supporting Documents

This section may be completed by the candidate or by his or her certifying professional or advocate. Provide any additional information you wish to be considered when this request for accommodations is reviewed.

_____

_____

_____

_____

_____

General Educational Development (GED) Testing Service will not discriminate against candidates for testing on the basis of any legally protected characteristic, including, but not limited to, race, color, religion, sex, sexual orientation, pregnancy, marital status, physical or mental disability, age, veteran status, and national origin.

12475

Request for Testing Accommodations
Attention-Deficit/Hyperactivity Disorder

To be completed by Chief Examiners.

Candidate's Last 4 SSN/SIN

Section 4: To be completed by GED Administrator

This section should be completed by the GED Administrator after reviewing the request for accommodations to document the outcome of the review.

☐ Approved For:

- ☐ Extended Time (please specify): ☐ 1-1/2 times ☐ 2 times ☐ Other: _____
- ☐ Audiocassette (tone-indexed) (requires extended testing time, generally double time)
  - ☐ 2 times ☐ Other: _____

  The use of this accommodation requires practice. Candidates should have an opportunity to practice using an Official GED Practice Test, Audiocassette Version prior to the scheduled testing date.
- ☐ Braille
- ☐ Scribe
- ☐ Calculator for Part II
- ☐ Talking Calculator for Entire Mathematics Test
- ☐ Private Room
- ☐ Supervised Breaks (specify in minutes):

  Uninterrupted testing time: _____ minutes, break time: _____ minutes
- ☐ Other:_

☐ Returned for more information. Date Returned: ____ / ____ / _____ (MM / DD / YYYY)

Reasons for returning request:

_____

_____

_____

☐ Request forwarded to GEDTS for review (explain reasons below.) Date Forwarded: ____ / ____ / _____ (MM / DD / YYYY)

Reasons for forwarding request to GEDTS for review:

_____

_____

_____

_____ _____ _____

GED Administrator's Signature *Telephone Number* *Date*

6027

Request for Testing Accommodations
Emotional/Mental Health

To be completed by Chief Examiners

Candidate's Last 4 SSN/SIN

Section 1: To be completed by GED Candidate

Fill in this section completely and sign the release of information statement. Make certain all sections are completed by the appropriate professional before you return the form to the Chief Examiner at your local testing center. The Chief Examiner will review the form and let you know if additional information is required.

Last Name: _____ First Name: _____

Social Security or Social Insurance Number: ___ ___ ___ ___ ___ ___ ___ ___ ___ Birth Date: ___ / ___ / _____ (MM DD YYYY) Age: _____

Address: _____

City: _____ State/Province/Territory: _____ ZIP/Postal Code: _____

Phone Number: (_____) _____ - _____

Release of information: If you are under 18 years of age, your parent or guardian's signature is also required.

I grant permission to school officials and my healthcare provider(s) to release my education-related records and/or my medical or psychological records to the GED Testing Service and its designees in connection with my request for testing accommodations.

_____ _____ _____

Candidate's Signature *Parent or Guardian's Signature (if appropriate)* *Date*

Section 2: To be completed by GED Chief Examiner

Please review the form to be certain all sections have been completed. Record the last four digits of the candidate's SSN/SIN in the top right corner of each page of this form. Missing information may delay the review of the candidate's request. Sign and date the form before sending it to your GED Administrator.

Chief Examiner Name: _____ 10-Digit Center ID #: _____

Center Name: _____

Phone Number: (_____) _____ - _____ FAX Number: (_____) _____ - _____

E-mail: _____

I have reviewed this application and confirm that it is complete.

_____ _____

GED Chief Examiner's Signature *Date*

Section 3: To be completed by Professional Diagnostician or Advocate

This section must be completed by the professional diagnostician. Alternatively, an advocate may complete this section using information from the professional diagnostician's report if the professional is unavailable or documentation is currently on file with a candidate's school district. An advocate is someone other than the professional diagnostician who helps the candidate request testing accommodations. The professional's report must indicate certification or licensure. Documentation and assessment tests must include a clear diagnosis and provide information on current functional limitations that might affect the candidate's ability to take the tests under standard conditions, so that the rationale for the requested accommodation can be properly evaluated. *Documentation will be viewed as sufficiently current if it has been completed within the last 6 months.* However, older documentation will be considered if that is all that the candidate can provide without undue burden or expense.

Please indicate your role: ☐ Professional Diagnostician ☐ Advocate

Name of Professional Making Diagnosis (please print): _____

Phone Number: (_____) _____ - _____ Date of Assessment: ___ / ___ / _____ (MM DD YYYY)

Licensure or Certification: Expiration Date: ___ / ___ / _____

State/Province/Territory: _____ Number: _____ Specialty: _____

Name of Advocate (please print): _____

Relationship to Candidate (please print): _____

Phone Number: (_____) _____ - _____

Professional Making Diagnosis or Advocate's Signature: _____

Date: ___ / ___ / _____ (MM DD YYYY)

6027

Request for Testing Accommodations
Emotional/Mental Health

To be completed by Chief Examiners

Candidate's Last 4 SSN/SIN

Section 3A: Emotional/Mental Health Impairment

To be completed by the professional diagnostician or person helping you complete this form.

To request accommodations for an Emotional/Mental Health disability, the current level of impairment and resulting functional limitations must be clearly documented, as well as any history that can be provided. Documentation should also state a specific recommendation(s) for accommodations and the accompanying rationale.

Documentation must include a letter on official letterhead, signed by a certifying professional who specializes in the diagnosis of the disability, and providing supporting documentation of this disability.

☐ Supporting documentation on professional diagnostician's letterhead attached. (Required.)

DSM-IV Code: _____ **Diagnosis:** _____

Condition:

Functional Limitations: _____

Recommended accommodation(s): _____

Rationale for accommodation(s): _____

Section 3B: Requested Accommodations

Please identify those accommodations that support the diagnosed disability.

☐ Extended Time (please specify): ☐ 1-1/2 times ☐ 2 times ☐ Other: _____

☐ Audiocassette (tone-indexed) (requires extended testing time, generally double time)

☐ 2 times ☐ Other: _____

The use of this accommodation requires practice. Candidates should have an opportunity to practice using an Official GED Practice Test, Audiocassette Version prior to scheduled testing date.

☐ Braille

☐ Scribe

☐ Calculator for Part II

☐ Talking Calculator for Entire Mathematics Test

☐ Private Room

☐ Supervised Breaks (specify in minutes):

Uninterrupted testing time: _____ minutes, break time: _____ minutes

☐ Other: _____

Section 3C: Other Information and Supporting Documents

This section may be completed by the candidate or by his or her certifying professional or advocate. Provide any additional information you wish to be considered when this request for accommodations is reviewed.

_____

_____

General Educational Development (GED) Testing Service will not discriminate against candidates for testing on the basis of any legally protected characteristic, including, but not limited to, race, color, religion, sex, sexual orientation, pregnancy, marital status, physical or mental disability, age, veteran status, and national origin.

6027

Request for Testing Accommodations
Emotional/Mental Health

To be completed by Chief Examiners

Candidate's Last 4 SSN/SIN

Section 4: To be completed by GED Administrator

This section should be completed by the GED Administrator after reviewing the request for accommodations to document the outcome of the review.

☐ Approved For:

☐ Extended Time (please specify): ☐ 1-1/2 times ☐ 2 times ☐ Other: _____

☐ Audiocassette (tone-indexed) (requires extended testing time, generally double time)

☐ 2 times ☐ Other: _____

The use of this accommodation requires practice. Candidates should have an opportunity to practice using an Official GED Practice Test-Audiocassette Version prior to scheduled testing date.

☐ Braille

☐ Scribe

☐ Calculator for Part II

☐ Talking Calculator for Entire Mathematics Test

☐ Private Room

☐ Supervised Breaks (specify in minutes):

Uninterrupted testing time: _____ minutes, break time: _____ minutes

☐ Other:_

☐ Returned for more information. Date Returned: ____ / ____ / _____ (MM / DD / YYYY)

Reasons for returning request:

_____

_____

_____

☐ Request forwarded to GEDTS for review (explain reasons below.) Date Forwarded: ____ / ____ / _____ (MM / DD / YYYY)

Reasons for forwarding request to GEDTS for review:

_____

_____

_____

GED Administrator's Signature *Telephone Number* *Date*

8051

Request for Testing Accommodations
Learning and Other Cognitive Disabilities

To be completed by Chief Examiners

Candidate's Last 4 SSN/SIN

Section 1: To be completed by GED Candidate

Fill in this section completely and sign the release of information statement. Make certain all sections are completed by the appropriate professional before you return the form to the Chief Examiner at your local testing center. The Chief Examiner will review the form and let you know if additional information is required.

Last Name: _____ First Name: _____

Social Security or Social Insurance Number: ___ ___ ___ Birth Date: ___ / ___ / _____ (MM DD YYYY) Age: _____

Address: _____

City: _____ State/Province/Territory: _____ ZIP/Postal Code: _____

Phone Number: (_____) _____ - _____

Release of information: If you are under 18 years of age, your parent or guardian's signature is also required.

I grant permission to school officials and my healthcare provider(s) to release my education-related records and/or my medical or psychological records to the GED Testing Service and its designees in connection with my request for testing accommodations.

Candidate's Signature _____ Parent or Guardian's Signature (if appropriate) _____ Date _____

Section 2: To be completed by GED Chief Examiner

Please review the form to be certain all sections have been completed. Record the last four digits of the candidate's SSN/SIN in the top right corner of each page of this form. Missing information may delay the review of the candidate's request. Sign and date the form before sending it to your GED Administrator.

Chief Examiner Name: _____ 10-Digit Center ID #: _____

Center Name: _____

Phone Number: (_____) _____ - _____ FAX Number: (_____) _____ - _____

E-mail: _____

I have reviewed this application and confirm that it is complete.

GED Chief Examiner's Signature _____ Date _____

Section 3: To be completed by Professional Diagnostician or Advocate

The professional diagnostician or the advocate may complete this section. Documentation and assessment tests must include a clear diagnosis and provide information on current functional limitations that might affect the candidate's ability to take the tests under standard condition. For most applicants, documentation is current if completed within the last 5 years. For persons with learning disabilities, GEDTS will also accept as current, documentation that is more than 5 years old if 1) the evaluation was conducted after the applicants 17th birthday, and b) a certifying professional provides a written statement on that professional's letterhead, stating why s/he believes there has been no change in the learning disability or need for the requested accommodation. Older documentation will be considered, if that is all the candidate can provide without undue burden or expense.

Please indicate your role: ☐ Professional Diagnostician ☐ Advocate

Name of Professional Making Diagnosis (please print): _____

Phone Number: (_____) _____ - _____ Date of Assessment: ___ / ___ / _____ (MM DD YYYY)

Highest Degree and Area of Specialization: _____

License Number: _____ Expiration: ___ / ___ / _____ (MM DD YYYY) State/Province/Territory: _____

Name of Advocate (please print): _____

Relationship to Candidate (please print): _____

Phone Number: (_____) _____ - _____

Professional Making Diagnosis or Advocate's Signature: _____

Date: ___ / ___ / _____ (MM DD YYYY)

8051

Request for Testing Accommodations
Learning and Other Cognitive Disabilities

To be completed by Chief Examiners

Candidate's Last 4 SSN/SIN

Section 3A: Measurement of Academic Achievement (Standard Scores)

To be completed by the professional diagnostician or advocate.

Date(s) of Assessment(s): ____ / ____ / _____
MM DD YYYY

Test Used (select one):

☐ WJ-R ☐ WJ-III, Ach. ☐ WIAT-I ☐ WIAT-II

Current Achievement (Include Standard Scores):

Broad Reading: _____ Broad Math: _____

Word Identification: _____ Calculation: _____

Comprehension: _____ Applied Problems: _____

Broad Written Language: _____ Broad Knowledge: _____

Dictation: _____ Skills: _____

Writing Sample: _____ Other: _____

Other Primary Tests Accepted (if Woodcock Johnson or Weschler not used):

☐ PIAT-R/NU ☐ PIAT-R ☐ K-TEA ☐ K-TEA/NU ☐ WRMT-R/NU ☐ Key Math - R/NU

Current Achievement (Include Standard Scores):

Subtest Name: _____ Subtest Score: _____ Standard Score: _____

Subtest Name: _____ Subtest Score: _____ Standard Score: _____

Subtest Name: _____ Subtest Score: _____ Standard Score: _____

Subtest Name: _____ Subtest Score: _____ Standard Score: _____

This information must be completed by the psychological diagnostician or advocate if the professional is different than the professional listed in section 3.

The professional diagnostician or the advocate may complete this section. Documentation and assessment tests must include a clear diagnosis and provide information on current functional limitations that might affect the candidate's ability to take the tests under standard condition. For most applicants, documentation is current if completed within the last 5 years. For persons with learning disabilities, GEDTS will also accept as current, documentation that is more than 5 years old if 1) the evaluation was conducted after the applicants 17th birthday, and b) a certifying professional provides a written statement on that professional's letterhead, stating why s/he believes there has been no change in the learning disability or need for the requested accommodation. Older documentation will be considered, if that is all the candidate can provide without undue burden or expense.

☐ Check here if you are also the professional diagnostician listed in Section 3

Please indicate your role: ☐ Psychological Diagnostician ☐ Advocate

Name of Psychologist (please print): _____

Phone Number: ( ) - _____ FAX Number: ( ) - _____

Highest Degree and Area of Specialization: _____

License Number: _____ Expiration: ____ / ____ / _____ State/Province/Territory: _____
MM DD YYYY

Name of Advocate (please print): _____

Relationship to Candidate (please print): _____

Phone Number: ( ) - _____

Psychologist Making Diagnosis or Advocate's Signature: _____

Date: ____ / ____ / _____
MM DD YYYY

8051

Request for Testing Accommodations
Learning and Other Cognitive Disabilities

To be completed by Chief Examiners

Candidate's Last 4 SSN/SIN

Section 3B: Measurement of Potential or Intelligence (Test Scores)

To be completed by the professional diagnostician or advocate.

Date(s) of Assessment(s): ____ / ____ / _____
MM DD YYYY

Test Used:

☐ WISC-III ☐ WAIS-III

Verbal IQ: _____ Performance IQ: _____ Full Scale IQ: _____

Index Scores:

Working Memory (WMI): _____ Processing Speed: _____

Perceptual Organization (POI): _____ Verbal Comprehension (VCI): _____

Subtest Scaled (i.e., Standard) Scores (mean of 10 with range of 1-19):

Information: _____ Similarities: _____ Object Assembly:

Digit Span: _____ Letter-Number Sequencing: _____ Digit Symbol: _____

Vocabulary: Coding (WISC-III): _____

Arithmetic: _____ Picture Completion: _____ Matrix Reasoning (WISC-III): _____

Comprehension: _____ Picture Arrangement: _____

Block Design: _____ Symbol Search: _____

Test Used:

☐ SB- IV ☐ SB-V

Subtest	Standard Score	Estimated Age Score
Verbal Reasoning:	_____	_____
Abstract/Visual Reasoning:	_____	_____
Quantitative Reasoning:	_____	_____
Short-Term Memory:	_____	_____
Test Composite:	_____	_____

Test Used:

☐ WJ-III, Cog

Subtest	Percentile Rank (Age)	Standard Score (Age)
Verbal Comprehension:	_____	_____
Visual-Auditory Learning:	_____	_____
Numbers Reversed:	_____	_____
Visual Matching:	_____	_____
Sound Blending:	_____	_____
Spatial Relations:	_____	_____
Concept Formation:	_____	_____

GIA Score: _____

8051

Request for Testing Accommodations
Learning and Other Cognitive Disabilities

To be completed by Chief Examiners

Candidate's Last 4 SSN/SIN

Section 3C: Diagnosed Disability

The professional diagnostician or advocate must select all appropriate diagnosed disabilities.

Specific Learning Disabilities (check all that apply)

- ☐ Reading Disability (identify: _____)
- ☐ Mathematics Disability (identify: _____)
- ☐ Written Language Disability (identify: _____)
- ☐ Other cognitive disabilities (list all that apply):

_____ _____

_____ _____

DSM-IV Code(s): _____

Section 3D: Requested Accommodations

Please identify those accommodations that support the diagnosed disability.

☐ Extended Time (please specify): ☐ 1-1/2 times ☐ 2 times ☐ Other: _____

☐ Audiocassette (tone-indexed) (requires extended testing time, generally double time)

☐ 2 times ☐ Other: _____

The use of this accommodation requires practice. Candidates should have an opportunity to practice using an Official GED Practice Test, Audiocassette Version prior to the scheduled testing date.

☐ Scribe

☐ Calculator for Part II

☐ Talking Calculator for Entire Mathematics Test

☐ Private Room

☐ Supervised Breaks (specify in minutes):

Uninterrupted testing time: _____ minutes, break time: _____ minutes

☐ Other: _____

Section 3E: Other Information and Supporting Documents

This section may be completed by the candidate or by his or her certifying professional or advocate. Provide any additional information you wish to be considered when this request for accommodations is reviewed.

_____

_____

_____

_____

General Educational Development (GED) Testing Service will not discriminate against candidates for testing on the basis of any legally protected characteristic, including, but not limited to, race, color, religion, sex, sexual orientation, pregnancy, marital status, physical or mental disability, age, veteran status, and national origin.

8051

Request for Testing Accommodations
Learning and Other Cognitive Disabilities

To be completed by Chief Examiners

Candidate's Last 4 SSN/SIN

Section 4: To be completed by GED Administrator

This section should be completed by the GED Administrator after reviewing the request for accommodations to document the outcome of the review.

☐ Approved For:

☐ Extended Time (please specify): ☐ 1-1/2 times ☐ 2 times ☐ Other: _____

☐ Audiocassette (tone-indexed) (requires extended testing time, generally double time)

☐ 2 times ☐ Other:_____

The use of this accommodation requires practice. Candidates should have an opportunity to practice using an Official GED Practice Test-Audiocassette Version prior to scheduled testing date.

☐ Braille

☐ Scribe

☐ Calculator for Part II

☐ Talking Calculator for Entire Mathematics Test

☐ Private Room

☐ Supervised Breaks (specify in minutes):

Uninterrupted testing time: _____ minutes, break time: _____ minutes

☐ Other:_

☐ Returned for more information. Date Returned: ____ / ____ / _____ (MM / DD / YYYY)

Reasons for returning request:

_____

_____

_____

☐ Request forwarded to GEDTS for review (explain reasons below.) Date Forwarded: ____ / ____ / _____ (MM / DD / YYYY)

Reasons for forwarding request to GEDTS for review:

_____

_____

_____

GED Administrator's Signature _____ Telephone Number _____ Date _____

63909

Request for Testing Accommodations
Physical/Chronic Health Disability

To be completed by Chief Examiners

Candidate's Last 4 SSN/SIN

Section 1: To be completed by GED Candidate

Fill in this section completely and sign the release of information statement. Make certain all sections are completed by the appropriate professional before you return the form to the Chief Examiner at your local testing center. The Chief Examiner will review the form and let you know if additional information is required.

Last Name: _____ First Name: _____

Social Security or Social Insurance Number: ___ ___ ___ ___ ___ ___ ___ ___ ___ Birth Date: ___ / ___ / _____ (MM DD YYYY) Age: _____

Address: _____

City: _____ State/Province/Territory: _____ ZIP/Postal Code: _____

Phone Number: (_____) _____ - _____

Release of information: If you are under 18 years of age, your parent or guardian's signature is also required.

I grant permission to school officials and my healthcare provider(s) to release my education-related records and/or my medical or psychological records to the GED Testing Service and its designees in connection with my request for testing accommodations.

Candidate's Signature _____ *Parent or Guardian's Signature (if appropriate)* _____ *Date* _____

Section 2: To be completed by GED Chief Examiner

Please review the form to be certain all sections have been completed. Record the last four digits of the candidate's SSN/SIN in the top right corner of each page of this form. Missing information may delay the review of the candidate's request. Sign and date the form before sending it to your GED Administrator.

Chief Examiner Name: _____ 10-Digit Center ID #: _____

Center Name: _____

Phone Number: (_____) _____ - _____ FAX Number: (_____) _____ - _____

E-mail: _____

I have reviewed this application and confirm that it is complete.

GED Chief Examiner's Signature _____ *Date* _____

Section 3: To be completed by Professional Diagnostician or Advocate

This section must be completed by the professional diagnostician. Alternatively, an advocate may complete this section using information from the professional diagnostician's report if the professional is unavailable or documentation is currently on file with a candidate's school district. An advocate is someone other than the professional diagnostician who helps the candidate request testing accommodations. The professional's report must indicate certification or licensure. Documentation and assessment tests must include a clear diagnosis and provide information on current functional limitations that might affect the candidate's ability to take the tests under standard conditions, so that the rationale for the requested accommodation can be properly evaluated.

Please indicate your role: ☐ Professional Diagnostician ☐ Advocate

Name of Professional Making Diagnosis (please print): _____

Phone Number: (_____) _____ - _____ Date of Assessment: ___ / ___ / _____ (MM DD YYYY)

Licensure or Certification: Expiration Date: ___ / ___ / _____

State/Province/Territory: ___ Number: Specialty:

Name of Advocate (please print): _____

Relationship to Candidate (please print): _____

Phone Number: (_____) _____ - _____

Professional Making Diagnosis or Advocate's Signature: _____

Date: ___ / ___ / _____ (MM DD YYYY)

63909

Request for Testing Accommodations
Physical/Chronic Health Disability

To be completed by Chief Examiners

Candidate's Last 4 SSN/SIN

Section 3A: Physical/Chronic Health Disability

To request accommodations for a Physical/Chronic Health disability, the current level of impairment and resulting functional limitations must be clearly documented, as well as any history that can be provided.

Documentation must include a letter on official letterhead, signed by a qualified professional, stating the diagnosed disability and providing supporting documentation of this disability.

Documentation for those candidates that have a Physical/Chronic Health disability should reflect current functional limitations.

☐ Supporting documentation on professional diagnostician's letterhead attached. (Required.)

Condition:

☐ Visual Impairment - Describe: _____

☐ Hearing Impairment - Describe: _____

☐ Mobility Impairment - Describe: _____

☐ Other Impairment - Describe: _____

Functional Limitations: _____

Recommended Accommodations: _____

Rationale for Accommodations: _____

Section 3B: Requested Accommodations

Please identify those accommodations that support the diagnosed disability.

☐ Extended Time (please specify): ☐ 1-1/2 times ☐ 2 times ☐ Other: _____

☐ Audiocassette (tone-indexed) (requires extended testing time, generally double time)
☐ 2 times ☐ Other: _____

The use of this accommodation requires practice. Candidates should have an opportunity to practice using an Official GED Practice Test, Audiocassette Version prior to the scheduled testing date.

☐ Braille

☐ Scribe

☐ Calculator for Part II

☐ Talking Calculator for Entire Mathematics Test

☐ Private Room

☐ Supervised Breaks (specify in minutes):
Uninterrupted testing time: _____ minutes, break time: _____ minutes

☐ Other: _____

General Educational Development (GED) Testing Service will not discriminate against candidates for testing on the basis of any legally protected characteristic, including, but not limited to, race, color, religion, sex, sexual orientation, pregnancy, marital status, physical or mental disability, age, veteran status, and national origin.

63909

Request for Testing Accommodations
Physical/Chronic Health Disability

To be completed by Chief Examiners

Candidate's Last 4 SSN/SIN

Section 4: To be completed by GED Administrator

This section should be completed by the GED Administrator after reviewing the request for accommodations to document the outcome of the review.

☐ Approved For:

☐ Extended Time (please specify): ☐ 1-1/2 times ☐ 2 times ☐ Other: _____

☐ Audiocassette (tone-indexed) (requires extended testing time, generally double time)

☐ 2 times ☐ Other: _____

The use of this accommodation requires practice. Candidates should have an opportunity to practice using an Official GED Practice Test-Audiocassette Version prior to scheduled testing date.

☐ Braille

☐ Scribe

☐ Calculator for Part II

☐ Talking Calculator for Entire Mathematics Test

☐ Private Room

☐ Supervised Breaks (specify in minutes):

Uninterrupted testing time: _____ minutes, break time: _____ minutes.

☐ Other: _

☐ Returned for more information. Date Returned: ____ / ____ / _____ (MM / DD / YYYY)

Reasons for returning request:

_____

_____

_____

☐ Request forwarded to GEDTS for review (explain reasons below.) Date Forwarded: ____ / ____ / _____ (MM / DD / YYYY)

Reasons for forwarding request to GEDTS for review:

_____

_____

_____

GED Administrator's Signature *Telephone Number* *Date*

29868

Testing Accommodations Appeal

Date Appeal Submitted: __ / __ / ____

To be completed by Chief Examiners

Candidate's Last 4 SSN /SIN

Section 1: To be completed by GED Candidate

Dear Candidate:

You or the person who is helping you complete this form may initiate an appeal of a decision to deny any requested accommodation. Please complete this form with all of the requested information. The GED Examiner will complete Section 2. Once you complete this form, attach any additional documentation that may help with the decision process, and return this form to the GED Chief Examiner at the Official GED Testing Center where you started the accommodations process.

Last Name: _____ First Name: _____

Social Security or Social Insurance Number: ___ ___ ___ Birth Date: __ / __ / ____

Address: _____

City: _____ State/Province/Territory: _____ ZIP/Postal Code: _____

Please attach a copy of your original Request for Testing Accommodations form and any additional documentation in support of your appeal.

Please describe your situation and your reasons for appealing the decision regarding your testing accommodations request. Attach additional pages if your appeal requires additional documentation.

_____

_____

Candidates' Signature: _____

Section 2: To be completed by GED Chief Examiner

Chief Examiner: _____ State/Province: _____

Center ID: _____ Center Name: _____

Phone Number: ( ) - FAX Number: ( ) -

Date Initial Testing Accommodation Request Submitted: __ / __ / ____ Date of Response: __ / __ / ____

Disability Type:

- ☐ Specific Learning Disability
- ☐ Attention-Deficit/Hyperactivity Disorder
- ☐ Physical or Chronic Health Condition
- ☐ Emotional or Mental Health Condition

Section 3: To be completed by Professional Diagnostician or Advocate

Please indicate your role: ☐ Professional Diagnostician ☐ Advocate

Name of Professional Making Diagnosis (please print): _____

Phone Number: ( ) - Date of Assessment: __ / __ / ____

Highest Degree and Area of Specialty: _____

Licensure or Certification: State / Province: _____ Number: _____

Name of Advocate (please print): _____

Employment of Advocate (please print): _____ Education Level of Advocate (please print): _____

Professional/Advocate's Signature: _____

29868

Testing Accommodations Appeal

To be completed by Chief Examiners

Candidate's Last 4 SSN /SIN

Section 4: To be completed by GED Administrator

☐ Approved for:

☐ Extended Time (please specify): ☐ 1-1/2 times ☐ 2 times ☐ Other: _____

☐ Audiocassette (tone indexed) (will require extended testing time, generally double time)

☐ 2 times ☐ Other: _____

The use of this accommodation requires practice. Candidates should have an opportunity to practice using an Official GED Practice Test, Audiocassette Version prior to the scheduled testing date.

☐ Braille

☐ Scribe

☐ Calculator for Part II

☐ Talking Calculator for Entire Mathematics Test

☐ Private Room

☐ Supervised Breaks (specify in minutes):

Uninterrupted testing time: _____ minutes, break time: _____ minutes

☐ Other: _

☐ Appeal forwarded to GEDTS for review (explain reasons below).

☐ Not approved (explain reasons below).

Signature of Administrator *Telephone Number* *Date*

Reasons for forwarding appeal to GEDTS for review:

Reasons for not approved:

Section 5

☐ Requested by Administrator ☐ Requested by Candidate