



General Educational Development (GED®) Age Waiver Application

A signed copy of withdrawal from last school attended and a copy of the approved GED Ready™: The Official Practice Test scores, must be attached to this application. Completed applications can be sent to: The School District of Palm Beach County, Department of Adult and Community Education, GED® Testing Office, 4200 Purdy Lane, Bldg. 50-103, Palm Springs, FL 33461. Applications can also be dropped off at one of our testing centers.

Application approval or disapproval is governed by the School District of Palm Beach County policy 8.09 and Florida Statute §1003.435.

A candidate for the GED® test shall be at least 18 years of age on the date of examination, except that in extraordinary circumstances as determined by the Superintendent or his/her designee, said candidate may take the examination after reaching the age of 16 years. Extraordinary circumstances may include, but are not limited to, the following: *An individual with medical or psychological problems; A recommendation from an appropriate court of law; Economic or personal hardship, authority: 1003.435 FS.*

NAME (first, middle initial, last)		AGE	DATE OF BIRTH (mm/dd/yyyy)	SOCIAL SECURITY NO. (optional)	
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	
ADDRESS			CITY	STATE	ZIP CODE
<input type="text"/>			<input type="text"/>	<input type="text"/>	<input type="text"/>
TELEPHONE NUMBER	<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work		May we text you?	EMAIL ADDRESS (REQUIRED)	
<input type="text"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/>	
LAST SCHOOL ATTENDED	WITHDRAWAL GRADE LEVEL	NAME OF ADULT EDUCATION SCHOOL AND ADULT ED TEACHER			
<input type="text"/>	<input type="text"/>	<input type="text"/>			

The score on the GED Ready™:The Official Practice Test must be a minimum of 150 on each sub-test. _____

I am applying for an age waiver for the following reason: (check one)

- I am enrolled in a GED® Exit Option Program at _____
- I am enrolled in a Department of Juvenile Justice Program at _____
- I am enrolled in home education. (Verification letter or N998 on A07 screen; schools must contact a Field Support Technician at 434-6847 or PX 46847)
- I am married and must work full-time. (A copy of marriage license must be attached.)
- I have a medical or psychological problem and cannot attend school. (A doctor's statement documenting the illness/disability must be attached.)
- I am under the supervision of a court of law or enrolled in an alternative school and it is recommended that I be granted an age waiver. (A letter from the court or from a school principal must be attached.)
- For economic reasons: The economic situation in the family requires that I work full-time. (A letter from your employer and a letter from a parent/guardian documenting economic hardship must be attached.)
- None of the above apply; however, I request that my extraordinary circumstances be considered. (A letter explaining the circumstances and appropriate documentation must be attached.)

I affirm under oath that the above statements and the attached documentation are true and correct to the best of my knowledge. I am aware that submission of this application does not necessarily mean it will be approved.

Signature of Parent/Guardian Date Signature of Applicant Date

STATE OF FLORIDA, COUNTY OF PALM BEACH	
Sworn to (or affirmed) and subscribed before me this ____ day of _____, 20__ by _____ (name of person making statement).	
Who is personally known to me or who produced as identification _____.	
Signature of Notary Public – State of Florida	Print, Type, or Stamp Commissioned Name of Notary Public, Commission Number and Expiration Date

SCHOOL DISTRICT USE ONLY - RECOMMENDATION

- Approved
- Declined

Signature Date