



**Office of the
State Superintendent of Education**

GED PRACTICE TEST APPLICATION

REGISTRATION IS NOT COMPLETE UNTIL APPROVED BY THE GED ADMINISTRATOR OR DESIGNEE.

The Official Practice Test is offered through DC OSSE GED Testing and Verifications to District of Columbia residents **ONLY**. There is no fee assessed to take this exam which lasts approximately 5 ½ hours. Pre-registration is necessary,

Kindly complete this application in its entirety. Print neatly and clearly in ink, taking care to sign and date the form.

SOCIAL SECURITY NUMBER:	_____ - ____ - _____	DATE OF BIRTH	MONTH	DAY	YEAR	AGE
LAST NAME/SURNAME		FIRST NAME		MIDDLE INITIAL		
STREET ADDRESS (PLEASE FILL IN THE APPLICANT'S PERMANENT ADDRESS)					APT#	
CITY		STATE	ZIP CODE		WARD	
HOME PHONE ()		ALTERNATE PHONE ()		GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		
TESTING INFORMATION – TO BE DETERMINED BY THE GED TESTING CENTER						
DATE OF TEST :			LOCATION: DC OSSE GED Testing and Verifications			
TIME: 8:15AM						
FOR GED TESTING CENTER USE ONLY						

Applicant Identification

Date Results Mailed

Date Entry
Date: _____
By: _____