



Columbia State

COMMUNITY COLLEGE

GED® INFORMATION SHEET

Congratulations on taking this step toward getting your GED®. The GED® test is administered through Testing Services at Columbia State Community College on the days listed below. You may contact us at (931) 540-2821 or (931) 540-2569, TDD Relay 1-800-848-0298, by fax at (931) 560-4113, or by email at: TestingServices@columbiastate.edu. Mailing Address: Testing Services, Columbia State Community College, 1665 Hampshire Pike, Columbia, TN 38401.

GENERAL REQUIREMENTS

AGE: To be eligible to take the tests, an applicant must be 17 years of age. Anyone 18 or younger or anyone who has been enrolled in the current school year must have an approval form (waiver) from the school system. The applicant must be officially withdrawn from high school and have not received a high school diploma or high school equivalency certificate.

FEE: \$13.00 per subject or \$65.00 for full battery. Make checks payable to: Columbia State Community College

IDENTIFICATION: Picture identification must accompany this application. A xerox copy of driver's license, passport, or state-issued identification card (available at the driver's license center in your county) is required.

OFFICIAL PRACTICE TEST: A notarized form from an Adult Education Center certifying that an Official GED® Practice Test has been taken is required.

STUDY GUIDE: Available at Adult Education Offices or log on to: www.gedtest.org

CONFIRMATION OF TEST DATE: Once your file is complete, a confirmation letter will be mailed to you confirming your scheduled test date. If the application is not complete, a letter will be mailed and the application will be put in the incomplete file until application is complete. Once requested documents are received, the applicant will be scheduled for the next available test date.

RETEST POLICY: Applicants may retest in each subject three (3) times during each calendar year using a different form each time.

REFUND AND CANCELLATION POLICY: There will be no refunds of these prepayments except for:

- 1) Death of immediate family
- 2) Documented illness
- 3) Documented work conflict

Applicants who fail to show up for a scheduled test will again be charged a test fee prior to being assigned a seat for the next test date.

PREVIOUS TEST SCORE: If you have taken the GED® Tests or portions of the Test at a testing center outside the state of Tennessee, you must request that your scores be forwarded to Columbia State Community College, Office of Testing Services, 1665 Hampshire Pike, Columbia, TN 38401. These scores must be received directly from the prior test site; a personal copy of your scores will not be accepted. These scores must be received before an applicant can be scheduled to test.

ACTUAL TEST ADMINISTRATION: Testing will begin at **8:00 a.m.** and will last approximately 8 hours. Everyone will be given a 30-minute lunch. All scratch paper will be provided. **YOU MUST BRING WITH YOU A DRIVER'S LICENSE WITH A PHOTO ON IT OR A STATE ISSUED ID CARD. IF YOU DO NOT HAVE ONE, YOU CANNOT TEST.**

*****If you have a disability and require an accommodation in taking this examination, please ask for a "Request for Accommodation" form. State approvals must be obtained before testing will be confirmed.*****

TEST DATES	LOCATION	TIME	REGISTRATION DEADLINE
October 8, 2009	Columbia (JSC-130)	8:00 am	September 30, 2009
October 17, 2009	Williamson County	8:00 am	October 9, 2009
October 22, 2009	Columbia (JSC-130)	8:00 am	October 14, 2009
November 5, 2009	Columbia (JSC-130)	8:00 am	October 28, 2009
November 19, 2009	Columbia (JSC-130)	8:00 am	November 11, 2009
November 21, 2009	Williamson County	8:00 am	November 13, 2009
December 3, 2009	Columbia (JSC-130)	8:00 am	November 24, 2009
December 5, 2009	Williamson County	8:00 am	November 24, 2009



GED® APPLICATION

APPLICANTS MUST DO THE FOLLOWING:

1. FILL OUT THIS FORM AND THE ATTACHED GED® DEMOGRAPHICS APPLICATION.
2. ENCLOSE A COPY OF A GOVERNMENT ISSUED PICTURE IDENTIFICATION (ID) (EX: DRIVER'S LICENSE, STATE ID CARD, ETC).
3. ENCLOSE A NOTARIZED OFFICIAL PRACTICE TEST VERIFICATION FORM.
4. ENCLOSE PAYMENT OF \$65.00 FOR FULL BATTERY OR \$13.00 PER SUBJECT.
MAKE CHECKS PAYABLE TO COLUMBIA STATE COMMUNITY COLLEGE
5. RETURN BOTH FORMS, ID AND PAYMENT TO: COLUMBIA STATE COMMUNITY COLLEGE
OFFICE OF TESTING SERVICES
1665 HAMPSHIRE PIKE
COLUMBIA, TN 38401

TESTING SERVICES STAFF WILL:

Mail a letter confirming your scheduled test date, time and location approximately two (2) weeks before your scheduled test date.

SOCIAL SECURITY NUMBER _____ HOME PHONE _____

NAME _____
LAST FIRST MIDDLE MAIDEN

ADDRESS _____ CITY _____ STATE _____ ZIP _____

DATE OF BIRTH _____ AGE _____

LAST SCHOOL ATTENDED _____
NAME CITY/STATE/ZIP

DATE LAST ATTENDED SCHOOL _____

DESIRED TEST DATES: _____ FIRST CHOICE _____ SECOND CHOICE

HAVE YOU PREVIOUSLY TAKEN THE GED® TEST SINCE JANUARY 1, 2002? _____ YES _____ NO

IF YES, LIST WHEN AND WHERE TEST WAS TAKEN:

MONTH/YEAR	CENTER NAME	ADDRESS

IF RETESTING, PLEASE CIRCLE THE PARTS YOU WILL BE TAKING:

LANGUAGE ARTS/READING LANGUAGE ARTS/WRITING MATHEMATICS SCIENCE SOCIAL STUDIES

*****APPLICANTS ARE RESPONSIBLE FOR FORWARDING THEIR PREVIOUS GED® SCORES TO THE GED® TESTING CENTER AT COLUMBIA STATE.*****

I CERTIFY THE ABOVE INFORMATION TO BE TRUE AND CORRECT.

SIGNATURE

DATE

(FOR OFFICE USE ONLY)

DATE FEE PAID _____ AMOUNT \$ _____ RECEIPT _____ TEST DATE _____
METHOD OF PROOF OF AGE: DL () STATE ID () OTHER () CNFM LETTER _____ OPT _____