

Internal GED/HSED Testing Records Request



Your Name *(Please Print Clearly)*

Last First Middle

Name while testing at Moraine Park, if different:

Last First Middle

Current Mailing Address:

Street _____

City and State _____

Zip Code _____ Phone Number _____

Date of Birth _____ S.S.# _____ - ____ - _____

GED/HSED Transcript of Scores:

Year tested _____ Completed Incomplete

Campus Test Site: Beaver Dam Fond du Lac West Bend

For Internal Use Only

All information must be provided in order for transcript to be processed.

Official records and transcripts must be obtained from WI DPI for job applications or other college admissions.

1-800-768-8886 <https://dpi.wi.gov/ged/transcripts>

Signature Required: _____

Submit completed form to: Patti Bryant
GED Examiner FDL Campus
235 North National Avenue
PO Box 1940
Fond du Lac, WI 54936-1940