

# WILL COUNTY REGIONAL OFFICE OF EDUCATION

## ILLINOIS GED TRANSCRIPT / DIPLOMA REQUEST FORM

**Please read instructions carefully:**

- Complete and mail this form with a **COPY OF VALID STATE ID OR DRIVER'S LICENSE** and the fee.
- **CANDIDATE'S SIGNATURE AND COPY OF PHOTO ID IS REQUIRED.**
- Payment must be cash or money order made payable to: **Will County ROE. Fees paid are nonrefundable.**

Check the boxes for each item you are requesting					
<input type="checkbox"/> Official Transcript	\$10.00 each	Quantity _____	Total _____		
<input type="checkbox"/> Diploma	\$10.00 each	Quantity _____	Total _____		
Year of GED completion: _____		Testing Site: _____			
Personal Information - Please print legibly.					
Last:		First:		Middle:	
Name during testing (if different from above):			Email Address:		
Social Security Number:		Date of Birth:		Phone Number:	
Street Address:		City:		State:	Zip:
Signature of Applicant (original signature required):				Date:	

<b>Transcript Recipient Information</b> - Complete this section <b>ONLY</b> if this transcript is being sent to a college, employer, or other entity.					
Name of Institution/Employer _____					
Attention/Contact Person _____					
Address _____		City _____		State _____	Zip _____
Phone Number _____		Fax Number _____			
Email Address _____					

Send form, copy of ID or Driver's License, and cash or money order (payable to Will County ROE) to:

**Will County Regional Office of Education**  
**Attn: Colin Phillips**  
**116 N. Chicago St. Suite 400**  
**Joliet, IL 60432**

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**Office Use Only:**      **Payment received:** \_\_\_\_\_      **Date issued:** \_\_\_\_\_