

Adult Diploma Program Request to Release Transcript Form

PLEASE NOTE: This request is **NOT** used for GED Transcripts. If you need a duplicate copy of your GED transcript/certificate, please go to the [GED Testing Service website](#) or call: 1-888-906-4031 and they will walk you through the ordering process.

Name: _____

Name(s) at time of credential (if different from above): _____

Current Address: _____

Current Phone # (in case we have questions): (____) _____

Social Security Number: _____ (This is used for verification purposes only)

Date of Birth: _____

Approximate Date of when you completed: _____

I authorize the Adult Education & Literacy Office of the Vermont Agency of Education to release a copy of my Adult Diploma Transcript(s) to the individual or organization(s) below:

Name: _____

Name: _____

Address: _____

Address: _____

City, State, Zip: _____

City, State, Zip: _____

Signature: _____ Date: _____

Once you have completed this form, please request that an **encrypted message** be set up for you by Miranda Scott at AOE.GEDInfo@vermont.gov, through which you can securely submit this form.

*Please expect at least 2 weeks to process your request(s). Missing information will result in further delays.

For questions, call the Transcript Line at (802) 828-6596 or email AOE.GEDInfo@vermont.gov
You can download this from the [Agency of Education's website](#).

Office Use Only: Date Rec'd: _____ Initials: _____