



INDEPENDENT LEARNING CENTRE  
CENTRE D'ÉTUDES INDÉPENDANTES

## General Educational Development (GED) Tests Application



**General Educational Development**  
2180 Yonge Street – 1st Floor  
Toronto, ON M4T 2T1  
Telephone: (416) 484-2737 1-800-573-7022  
email: ged@tvo.org

**IMPORTANT**  
To write a GED Test you must  
• be at least 18 years of age  
• have been out of school for at least one full year  
• not have graduated from high school  
• be a resident of Ontario

**PLEASE PRINT YOUR PERSONAL INFORMATION CLEARLY IN THE SPACES ON THE FORM.**

Last name (as per I.D. submitted): \_\_\_\_\_ First name: \_\_\_\_\_ Middle name: \_\_\_\_\_

Last name at birth: \_\_\_\_\_ email address (REQUIRED): \_\_\_\_\_

Apt. number: \_\_\_\_\_ Mailing address (building number and street name): \_\_\_\_\_ City: \_\_\_\_\_ Province: **Ontario**

Postal code: \_\_\_\_\_ Telephone number: \_\_\_\_\_ Daytime telephone number: \_\_\_\_\_ Ext.: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_ Last grade completed at school: \_\_\_\_\_ Grade: \_\_\_\_\_ Year: \_\_\_\_\_ Month: \_\_\_\_\_ Sex: Female  Male

**I am applying:**  To write the five tests for the first time  
 To rewrite the following test(s):  1. Language Arts, Writing  4. Social Studies  
 2. Language Arts, Reading  5. Science  
 3. Mathematics

For ILC use only

*You must rewrite any test where your standard score is less than 450. A rewrite is allowed with no waiting period if the score is 400 or more. If the score is 390 or less, you cannot rewrite for 3 months. Use this time to prepare. Tests may only be written twice in any calendar year.*

**FEES**

A non-refundable fee of \$100.00 must accompany your application. The fee can be paid by certified cheque, money order, Visa, or Mastercard. An NSF cheque will result in a \$35.00 charge and your test scores will be withheld. Please note that there is a non-refundable fee of \$100.00 for each attempted rewrite.

**\$100.00 to be paid by:**  Visa  MasterCard  Money order  Cheque certified by your bank

**Important:** Make your certified cheque or money order payable to **TVO – GED**.

Card number : \_\_\_\_\_ Expiry date (MM/YY): \_\_\_\_\_

Name of cardholder: \_\_\_\_\_ Signature of cardholder: **X** \_\_\_\_\_

Name of paying Centre (if applicable) \_\_\_\_\_

**VERY IMPORTANT – PLEASE READ CAREFULLY**

To the best of my knowledge, the information I have given on this application is complete and correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_

This information is collected in accordance with the Education Act, Revised Statutes of Ontario, 1980, Chapter 129, Section 8 (q) and Chapter 237. The information will be used for eligibility purposes and for evaluation requirements of the GED certificate. This information may also be used by TVO for statistical purposes. For additional information, please contact the GED Administrator at (416) 484-2737.