

National External Diploma Program (NEDP®) Diploma/Transcript/Verification Request Form



To complete the form: Tap/click in the fillable spaces. You may attach an authenticated digital signature or print the form, sign and date at the bottom in blue or black ink. **OR** Print the form and fill in information in the fillable spaces.

Mail completed form to: Maryland Department of Labor, 100 South Charles Street, Tower 1, Suite 2000, Baltimore, Maryland 21201. **OR** Send via **encrypted email** to ged.dllr@maryland.gov. **Please allow 7-10 business days for processing.**

What document(s) are you requesting?

Official NEDP® Transcript Official NEDP® Diploma NEDP® Diploma Verification Only

Full Name (as it appears on your diploma/NEDP® record): _____

Month/Year Graduated: _____ **SSN (last 4 digits):** _____

Date of Birth (MM/DD/YY): _____

Name of NEDP® site where graduated: _____

Current Legal Name (if different from above): _____

Current Street Address/Apt/Room/Floor: _____

City/State/Zip: _____

Email: _____ **Phone:** _____

Mail official Transcript/Diploma/Verification to the following address (if different from above)

Recipient Name: _____

Organization/Institution: _____

Street Address/Floor/Room/Suite: _____

City/State/Zip: _____

PRIVACY STATEMENT: I consent to the release of personally, identifiable information from my education records. I understand that the records to be disclosed include personally identifiable information from education records. I acknowledge that the purpose is to assist the Maryland Department of Labor in obtaining, producing and reporting academic records concerning students who earn a secondary school diploma or its equivalent as required by section 212 of the Adult Education and Family Literacy Act.

Student Signature:

Date: