

**PLEASE  
STAPLE MONEY ORDER  
OR  
CERTIFIED CHECK HERE**

**ATTACHMENT H**  
Request for a copy of a NYS  
High School Equivalency  
diploma or transcript.

The University of the State of New York  
THE STATE EDUCATION DEPARTMENT  
High School Equivalency (HSE) Office  
89 Washington Avenue, EBA 460, Albany, New York 12234  
(518) 474-5906

**Do NOT use this form to obtain school records. Contact the school that you attended for high school diplomas and transcripts.**

Please provide the following information to assist us in locating your records.  
IF YOU ARE REQUESTING INFORMATION ON BEHALF OF THE DOCUMENT HOLDER,  
PLEASE BE ADVISED THAT THE DOCUMENT HOLDER MUST ALSO SIGN THE RELEASE.

CFLN:  
(For Office Use Only)

**Do NOT send cash or personal checks.**  
**ONLY money orders or certified checks will be accepted.**

Check One:  **Diploma & Transcript (\$10.00)**  **Transcript Only (\$4.00)**  
 **Failure Notice (\$4.00)**

**Document Holder Information: Please type or print clearly in ink.**

Last Name at Time of Completion		First Name	Middle Initial	Suffix	Date of Birth / / mm dd yyyy	
Social Security Number (Last 5-Digits) or Other Government ID	HSE Pathway (choose one)	Institution Name			Year Credential Earned	
	<input type="checkbox"/> GED®/TASC™	Test Center Name:				
	<input type="checkbox"/> 24-College Credit	College:				
Email Address:	<input type="checkbox"/> NEDP Program	NEDP Agency:				
Current Home Address—Street/PO Box and Apt. Number				Apt #	Daytime Phone Number ( ) -	
City				State	Zip Code	
Phone ( ) -		Email				

**Mail the Diploma and/or Transcript to (if other than to the address indicated above):**

Recipient Name (Person, college, employer, etc.)					
Street					Apartment No.
City		State	Zip Code	Phone ( ) -	
Phone ( ) -		Email			

**NOTE:** A **non-refundable processing fee of \$10.00** (diploma with transcript) or **\$4.00** (transcript only or failure notice) is required for each document requested. The required fee, made payable to **NYSED**, must be in the form of a **MONEY ORDER** or a **Certified Check** for each request. **NO CASH or PERSONAL CHECKS** will be accepted. For international document requests, a pre-paid, self-addressed return envelope that is at least 6 by 9 inches must be included with this form. International money orders must be drawn on a U. S. bank. The diploma and/or transcript will not be sent until the required fee is submitted to this office. Mail your request to the address indicated on the top of this form.

Document Holder's Signature

X \_\_\_\_\_ Date \_\_\_\_\_  
Signature mm / dd / yyyy

Note: If you are not the document holder and are obtaining a diploma/transcript for another at the NYSED HSE Window, you must have a notarized letter stating that you are authorized to obtain the record.

Required Signature of Person Requesting Verification (If other than the document holder)

X \_\_\_\_\_ Date \_\_\_\_\_  
Signature mm / dd / yyyy