



UNIVERSITY of
NEW ORLEANS

OFFICE OF ADMISSIONS

Request for Transcript of Louisiana GED

Date: _____

Louisiana State Department of Educations
Adult Education Center
1201 North 3rd. Street
Baton Rouge, LA 70802

Telephone #: (225) 342-0444

Please send one (1) copy of my official GED transcript to:

University of New Orleans
Office of Admissions
103 Administration Building
Lakefront
New Orleans, LA 70148

Date GED Completed: _____

PLEASE PRINT:

FULL NAME (INCLUDE MAIDEN OR OTHER PREVIOUS SURNAMES)

DATE OF BIRTH

PRESENT ADDRESS

CITY/STATE/ZIP

SIGNATURE OF STUDENT

To locate GED contacts in other states go to <http://www.acenet.edu/calec/ged/gedadmin1-A.cfm> on the Internet.