



5460

GED Testing Service

of the American Council on Education
One Dupont Circle, NW, Suite 250
Washington, DC 20036
(202) 939-9490

L-55 Challenge of Test Score

Dedicated FAX number for this form: (202) 464-4853

Official GED Test Center Information

Date: / /
mm dd yyyy

Center Name: _____

10-Digit Center ID Number: _____

GED Examiner: _____

Address: _____

City: _____

State/Province/Territory: _____

Zip/Postal Code: _____

E-mail: _____

Phone Number: () -

FAX Number: () -

Test Scores Information

Please complete the following information:

Content	Test Date mm/dd/yyyy	Form	Format Code	Standard Score
Language Arts, Writing	<u> </u> / <u> </u> / <u> </u>			
Language Arts, Reading	<u> </u> / <u> </u> / <u> </u>			
Mathematics	<u> </u> / <u> </u> / <u> </u>			
Science	<u> </u> / <u> </u> / <u> </u>			
Social Studies	<u> </u> / <u> </u> / <u> </u>			
ESL	<u> </u> / <u> </u> / <u> </u>			
Total Score				<input style="width: 100px; height: 20px;" type="text"/>

Challenge Information

Test Score(s) Being Challenged: _____

Reason for Challenge: _____

Candidate's Name: _____

Social Security/Social Insurance Number: - -

Address: _____

City: _____

State/Province/Territory: _____

Zip/Postal Code: _____

LINK



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Examiner

The GED Examiner must:

	Date mm/dd/yyyy
Contact Scoring Site	__ / __ / __
Request re-evaluation of answer booklet	__ / __ / __
Request re-evaluation of essay	__ / __ / __

GED Administrator

Result for Challenge:

Signature of GED Administrator

Jurisdiction

__ / __ / __
Date