# ICCS_50_Years_Logo_220x419

# Illinois High School Equivalency Certificates Order Form

|  |  |
| --- | --- |
| Quantity | Item |
|       | Illinois Community College Board High School Equivalency Certificates(300 maximum order) |

**Ordering Agency**

|  |  |
| --- | --- |
| Regional Office of Education  | #      |
| Attention:  |       |
| Street Address:  |        |
| City, State, Zip Code:  |       |

**Comments or Delivery Directions**

|  |
| --- |
|                      |

**Order Requested by:**       **Date Requested:**

**Completed form may be faxed to 217-558-6700 or emailed to** **ilhseiccb@iccb.state.il.us****.**

**ICCB USE ONLY**

|  |  |
| --- | --- |
| **Received:** | **Completed:** |
| **Completed by:** | **Comments:** |