Jeff Ekena Regional Superintendent jekena@roe53.net Regional Office of Education #53 2400 N. Main Street, Suite C East Peoria, IL 61611 Phone: 309-477-2290

Jon Smith
Assistant Superintendent
ionsmith@roe53.net

Phone: 309-347-3735

Mark the number of each item you are	requesting. Cash order	s will not be honored.	
() Transcript: (\$10.00 per co	opy)	Today's date:	/
(Please make check or mor Office of Education". Fees		Total Dollar amount encl (Please make check or money ord Office of Education". Fees are no will not be honored and will be re	er payable to "Regional n-refundable. <mark>Cash requests</mark>
	Personal Info	<u>emation</u>	
Name used at time of test:			
Current Name:		Social Security No	
Current Address:		Date of Birth:	/
City:S	tate:Zip	Phone No.()
County Where Test Was Taken:			
I	hereby	authorize my GED scores to	be released.
_	<u>Franscript Recipien</u> ction only if the tran	t Information script is <u>not</u> being sent to yo	и.
Name of College:		ATTN:	
Address:	City:	State:	Zip:
Name of Employer:		ATTN:	
Address:	City:	State:	Zip: