

Montana High School Equivalency (HSE) 16 Year Old Waiver Application for HSE Testing

	_ Sex: Male Female
First Name:	Last School Attended:
Middle Initial: Birth Date:	Last Date Attended (mm/yyyy):
Mailing Address:	
City	Check-box for selection, below (choose only one):
City:	Testing at a GED Test Center
State:Zip:	Location:
GED/HiSET ID #:	Testing at a HiSET Test Center
	Location:
	 Testing via Online Proctored GED
Date of Birth:	(Online Proctored GED tests are recorded).
Signature:	Date:
SCHOOL SECTION (to be completed by Chi	ief Education Officer)
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Checklist for completing the 16 Year Old Waiver Application All letters must be on official letterhead and include verifiable contact information.

16 Year Old Waiver Application - Administrative Rules of Montana (ARM) 10.66.113: A completed, signed, and notarized 16-year old age waiver application form with inked signatures providing school status as required under ARM 10.66.112 and notarized permission from the candidate's parent or legal guardian demonstrating consensus of applicant, chief education officer, and applicant's parent/legal guardian that HSE testing is considered in the best educational interest of the applicant.

Letter Verifying High School Withdrawal:

An original letter on official letterhead with signature from a chief education officer (Principal, Vice Principal, HS Counselor, Home School Parent, or County Superintendent) that clearly identifies the candidate by name, date of birth, and provides the last school enrollment date and verifying the candidate has been advised of in-school and alternative education options.

Letter of Academic Preparedness:

An original letter on official letterhead with signature from an OPI Adult Education Director or Literacy Program Director stating the candidate has successfully completed HSE preparation classes or has attained pretest scores indicating a likelihood that the candidate will pass the official HSE test; and documentation from the same source certifying the applicant obtained pre-test scores substantiating preparedness for the official HSE Test Battery. Attach the 16 Year Old High School Equivalency Testing Recommendation Form posted on the OPI HSE Website.

Letter from Postsecondary, Training, or Employer:

An original letter on official letterhead with signature from an employer, continuing education, or training program indicating that acceptance of the candidate is based upon successful completion of HSE testing.

Montana Identification:

A copy of the test taker's current state issued photo ID documenting Montana residency.

Send the entire completed application packet to:

High School Equivalency Program Montana Office of Public Instruction PO Box 202501 Helena, MT 59620-2501

Questions? Call the HSE Helpline at 406-444-4151 or email OPIHSE@mt.gov.

Helpful links:

Administrative Rules

Home School Withdrawal Letter Template to HSE Test