

National External Diploma Program (NEDP®) Diploma/Transcript/Verification Request Form



To complete the form: Tap/click in the fillable spaces. Print the form, sign and date at the bottom in blue or black ink.
OR Print the form and fill in information in the fillable spaces.

Mail completed form to: Maryland Department of Labor, 1100 N. Eutaw Street, Room 120, Baltimore, Maryland 21201. **Please allow 7-10 business days for processing.**

What document(s) are you requesting?

Official NEDP® Transcript Official NEDP® Diploma NEDP® Diploma Verification Only

Full Name (as it appears on your diploma/NEDP® record): _____

Month/Year Graduated: _____ **SSN (last 4 digits):** _____

Date of Birth (MM/DD/YY): _____

Name of NEDP® site where graduated: _____

Current Legal Name (if different from above): _____

Current Street Address/Apt/Room/Floor: _____

City/State/Zip: _____

Email: _____ **Phone:** _____

Mail official Transcript/Diploma/Verification to the following address (if different from above)

Recipient Name: _____

Organization/Institution: _____

Street Address/Floor/Room/Suite: _____

City/State/Zip: _____

PRIVACY STATEMENT: I consent to the release of personally, identifiable information from my education records. I understand that the records to be disclosed include personally identifiable information from education records. I acknowledge that the purpose is to assist the Maryland Department of Labor in obtaining, producing and reporting academic records concerning students who earn a secondary school diploma or its equivalent as required by section 212 of the Adult Education and Family Literacy Act.

Student Signature:

Date: