Your ticket to a U.S. High School Equivalency Diploma

Authorized Education Partner (AEP)
Application Packet
Contents

1. Application
2. Performance assessment matrix

TO DO LIST – ARE YOU READY TO APPLY?

☐ Have you completed the application form and performance assessment matrix?

☐ Have you collated documentary evidence for all performance targets?

☐ Do you know how to contact us?
Application to become an Authorized Education Partner

The GED Authorized Education Partner (AEP) program is for education providers that provide test preparation for the GED® Test.

Please complete this application form and attach your supporting evidence to apply for approval as part of our authorized education partner program. Application by email to: taweesak.jouchounchom@gedtestingservice.com

Note:
All supporting materials in relation to an application for Authorized Education Partner are required to be completed in English. GED Testing Service LLC will review your materials submitted in this application and reserves the right to determine whether to move forward with an International GED® Testing Partner Agreement.

PART 1
INSTITUTION DETAILS

Institution name

Address

Town/ City

Country

Website address (if applicable)

Date of establishment of the institution

Name of holding company or group, where appropriate

Institution legal structure including:

Jurisdiction of organization

Date organized

Entity licenses
Business licenses or certificates

Description of business, customers, industry sectors:

Are you currently a Pearson VUE authorized test center (PVTC)

☐ Yes

☐ No

If yes, what is your site ID?
CONTACT DETAILS

Please provide details for one member of staff who will be our dedicated point of contact within your institution for all communications regarding this application and for the subsequent Agreement.

You should also provide details of any staff members who will be the dedicated point of contact for prospective test-takers to your institution. These contact details will be displayed on our Authorized Education Partner (AEP) directory at www.ged.com

Name: ____________________________
Position: ____________________________
Telephone number (including full country code and area codes): ____________________________
Email address (mandatory) (Company domain preferred): ____________________________

Contact for student enquiries (if different from above)
Name: ____________________________
Position: ____________________________
Telephone number (including full country code and area codes): ____________________________
Email address (mandatory): ____________________________

OWNERSHIP/MANAGEMENT INFORMATION

- Name of the ownership/principals/partners/directors/officers: ____________________________
- Address of the ownership/principals/partners/directors/officers: ____________________________
- Nationality of the ownership/principals/partners/directors/officers: ____________________________
- Identity of any other persons having a direct or indirect ownership interest in the institution’s equity, revenue or profits: ____________________________
- Name, address, nationality, ID type/number and title for each officer of the institution: ____________________________
- Information on any other business affiliations of principals, owners, partners, directors, officers, or key employees who will manage the business relationship: ____________________________
GOVERNMENT RELATIONSHIPS

• Information on whether any principals, owners, partners, directors, officers, or employees hold any official office or have any duties for any government agency or public international organization:

• Information on whether any owners, directors, officers or key employees have an immediate family member who is an employee, contractor or official of the foreign government, or a public international organization:

• Information on whether any employee of, or contractor or consultant to, any government entity or public international organization will benefit from the relationship:

• Approximate percentage of entity’s overall annual sales revenue derived from government sales:
BUSINESS CONDUCT

- Information on whether the entity has ever been barred/suspended from doing business with a government entity

REFERENCES

- Three or more unrelated business references, including a bank and existing client
1. 
2. 
3. 

FACILITIES

Facilities (not applicable to distance learning/e-learning)

What facilities does your institution offer for students?

- Car parking
- Library
- Disabled access
- Canteen facilities
- Computer availability
- Lodging

PART 2 – PAYMENT

If your application is successful, a fee of $250 will be charged as part of the International GED Testing Program Agreement. An annual fee of $250 is payable every year thereafter. This fee will retain your entry on our Authorized Education Partner (AEP) directory for your institution for the remainder of the current year. Please note that the renewal cycle for learning provider listings runs annually from the time when you had become a partner. You will be invoiced for the next period’s listing in the last quarter of the current year.
PART 3 – CERTIFICATION/DECLARATION

This declaration must be signed and included with your application.

As the authorized representative of the institution completing this application, I hereby declare that all information provided as part of this application is, to the best of our knowledge, accurate and complete.

I confirm that the institution complies with all local regulatory requirements for test prep providers where such requirements exist.

I understand that it is the institution’s responsibility to keep GED Testing Service up to date with any change to both the contact details supplied previously and those contained within this application. This is to ensure that the contact details contained within the Authorized Education Partner (AEP) directory are accurate.

The institution agrees to comply with the rules and terms of the AEP program and accept that GED Testing Service reserves the right to request additional information relating to matters included in this application, both prior to granting approval and during the period of approval. We recognize that GED Testing Service Approval department is solely responsible for all decisions regarding the awarding, renewal and removal of approval.

The institution accepts that GED Testing Service reserves the right to decline approval to institutions that fail to meet the required approval criteria. The institution understands that there is no appeal process and that GEDTS’s decision is final.

Anti-Bribery and Corruption compliance: The institution will fully comply with GED Testing Service’s Anti-bribery and corruption Policies.

This Application is signed by a duly authorized representative of the institution seeking to enter into the GED Testing Service International GED® Testing Program Partner Agreement and this Application will be incorporated into the Agreement by reference.

Signed

Name

Position

On behalf of {institution name} Date