

The University of the State of New York  
THE STATE EDUCATION DEPARTMENT  
**High School Equivalency (HSE) Office**  
89 Washington Avenue, EBA 460  
Albany, NY 12234-1000  
(518) 474-5906 / HSE@nysed.gov

**Instructions and Application for the Interstate Transfer of GED® and TASC™ Scores  
for a New York State High School Equivalency (HSE) Diploma**

**1. General Information**

- The New York State Education Department (NYSED) will recognize passing GED® subtest scores taken outside of New York State (NYS) from 2002-2013. These scores can be combined with passing TASC™ subtest scores from within and outside of NYS from 2014 to present.
- Official GED® transcripts - from the other states where GED® tests were taken - must be obtained directly from that state and submitted with the completed Attachment I application (on next page).
- To transfer TASC™ subtest scores taken outside of NYS after 2013 you will need to complete and submit the Data Recognition Corporation (DRC) online Interstate Transfer Form. The online form can be found at <http://tasctest.com/pdfs/TASCTestInterstateTestForms.pdf> or request by phone at 888-282-0589.
- After you submit the Interstate Transfer Form to DRC, DRC will transfer your existing TASC™ scores from the state where you tested to NYS.
- DRC will notify you by email when your TASC™ scores have been transferred to NYS. You must then register for a DRC account in NYS to receive a NYS UUID (universally unique ID number). The link to register for a UUID in NYS is: <https://newyork.tasctest.com/Default.asp>.
- Your TASC scores from other states will then applied to your NYS account. Please note that only passing scores will be recognized.
- Candidates must also meet residency requirements, as described below, and have met age requirements to take the GED® or TASC™.
- New York State residents who took GED® subtests in a federal incarceration program or Job Corps facilities located outside NYS should contact the program's Education Supervisor for directions on how to obtain the official transcript of their GED® scores.

**2. Eligibility Requirements**

All candidates for the NYS HSE diploma must: 1) have lived in NYS for at least 30 days; 2) have met the age requirements to test for the GED® and/or TASC™; and 3) not already have graduated from high school or 4) not already have a HSE diploma in any state.

**3. How to Apply for a New York State High School Equivalency Diploma Based on Out-of-State Testing**

The NYSED Attachment I application form can be found on the next page. It should be completed and mailed to the NYSED HSE Office. The HSE mailing address is located at the top of the page.

**GO TO THE NEXT PAGE TO COMPLETE THE PAPER APPLICATION**

The online version of Application I can be found at: [Online Application I](#)

If you have any questions, please email the NYSED HSE Office at [HSE@nysed.gov](mailto:HSE@nysed.gov)

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1. First Name \_\_\_\_\_ 2. Last Name \_\_\_\_\_

3. Date of Birth \_\_\_\_\_

4. Street Address or P.O. Box \_\_\_\_\_  
(Include Apartment Number, if needed)

5. City \_\_\_\_\_ 6. State \_\_\_\_\_

7. Zip Code \_\_\_\_\_

8. Telephone Number \_\_\_\_\_  
(If no phone, use, 999-999-9999)

9. Email Address \_\_\_\_\_ 10. Confirm Email Address \_\_\_\_\_

10. State and year GED® was taken \_\_\_\_\_  
(GED® scores from 2002-2014 only)

11. Have you enclosed the official GED® transcripts from the state where the GED® was taken from 2002-2014?  
\_\_\_ Yes \_\_\_ No (If No, your request cannot be processed).

12. State and year that TASC™ was taken \_\_\_\_\_  
(TASC™ scores from 2014 to present, only)

13. Social security number or UUID from another state \_\_\_\_\_  
(You should have a UUID if the TASC™ was taken in another state from 2014 to present.)

14. In order to transfer TASC™ scores, for tests taken outside of NYS after 2013, you need to obtain and submit an Interstate Transfer Form to the Data Recognition Corporation (DRC). The form can be found at <http://tasctest.com/pdfs/TASCTestInterstateTestForms.pdf> or by calling the DRC Help Desk at 888-282-0589.

15. Signature of Applicant \_\_\_\_\_

16. Date of this Application \_\_\_\_\_

PLEASE MAIL TO THE ADDRESS AT THE TOP OF THIS APPLICATION. THANK YOU.