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GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF TALENT AND ECONOMIC DEVELOPMENT  
LANSING

STEVE ARWOOD  
DIRECTOR

## Education & Career Success Division Test Center GED Manager™ User Agreement

The users of GED Manager™ overseen by the Talent Investment Agency/Workforce Development Agency (TIA/WDA) agree to comply with all of the following conditions:

- In my role as the GED® Administrator, I request access to GED Manager™ for the individual(s) listed on page 2 titled “GED Manager™ Access Request and Authorization.” The individuals listed have duties and responsibilities that require access to the Jurisdictional test-taker records in GED Manager™ and I authorize the TIA/WDA GED® Office to notify the GED Testing Service, LLC to grant these individuals access to the Jurisdiction’s test-taker records through GED Manager™. If any of the individual’s duties or responsibilities change so access to GED Manager™ is no longer required by them, I shall promptly notify the TIA/WDA GED® Office so the individual’s user account is disabled and access terminated.
- GED® Administrators are responsible for maintaining local computer and web access security to prevent unauthorized access to GED® records via the GED Manager™ system. Unauthorized personnel may not use local user access passwords.
- No GED® testing or certification information on the GED Manager™ system may be reviewed or distributed without the written permission of the GED® candidate.
- Failure to comply with this user agreement shall result in the immediate suspension of user access to the GED Manager™ system and suspension of GED® test center approval status.

I have read this user agreement and will comply with all GED Testing Service, LLC and TIA/WDA GED Office requirements.

**Test Center Name:** \_\_\_\_\_

**Test Center Address:**

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, ZIP

**Test Center ID Number:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Fax Number:** \_\_\_\_\_

\_\_\_\_\_  
Test Administrator Name  
(Printed)

\_\_\_\_\_  
Test Administrator  
(Signature)

Date: \_\_\_\_\_

**(See Reverse Side)**

## GED Manager™ Access Request and Authorization

Printed User Name	Title	User's Signature	User Work E-Mail	<b>Role:</b> Administrator or Staff who can view scores and confidential student information, and access GED Analytics.
<b>Justification for access:</b> Individuals listed above have job functions requiring viewing rights to private tester demographics, authorization status, and scores.				

Note: Fax the completed two pages to [TIA/WDA GED Program](mailto:TIA/WDA GED Program) at 517-335-3461, or scan the completed two pages and e-mail to [GEDProgram@michigan.gov](mailto:GEDProgram@michigan.gov).