

## **Mission GED® Application**

## AmeriHealth Caritas New Hampshire's program to help you get your high school equivalency diploma

Complete this form to take the first steps toward your future. You may also get this form on our website at www.amerihealthcaritasnh.com/GED or by calling our Rapid Response and Outreach Team at 1-833-212-2264 to request a form by mail.

## To participate, you must:

- Be a current AmeriHealth Caritas New Hampshire member.
- Be 18 years old or older.
- Not have a high school diploma or equivalent.
- Not be currently enrolled in high school or college.

## Mail completed forms to:

AmeriHealth Caritas New Hampshire 25 Sundial Avenue Suite 130W Manchester, NH 03103

Are you a current member of			AmeriHealth Caritas			
AmeriHealth Caritas New Hampshire? ☐ Yes ☐ No New Hampshire ID:						
Name:			□ Male □ Female			
Street address:						
City:			State:		ZIP:	
Email address:						
Age:	Date of birth:		Phone number:			
Race or ethnicity:	Primary language spoken:					
What is the last grade of school you completed?		Are you in school now?				
Have you ever attended an adult education program (high school equivalency diploma program)? If so, where?						
Are you currently attending a high school equivalency diploma program? If so, where?						
Applicant signature:			Date:			

Rapid Response and Outreach Team: 1-833-212-2264

AmeriHealth Caritas New Hampshire complies with applicable federal civil rights laws and does not discriminate, exclude people, or treat them differently on the basis of age, race, ethnicity, national origin or ancestry, mental or physical disability, sexual or affection orientation or preference, gender identity, marital status, genetic information, source of payment, sex, color, creed, religion, health or mental health status or history, need for health care services, amount payable to AmeriHealth Caritas New Hampshire on the basis of an eligible person's or member's actuarial class or pre-existing medical/health conditions, whether or not the member has executed an advance directive, or any other status protected by federal or state law.

Attention: If you do not speak English, language assistance services, free of charge, are available to you. Call **1-833-704-1177** (**TTY 1-855-534-6730**).

Atención: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-833-704-1177 (TTY 1-855-534-6730)**.

Attention : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-833-704-1177** (**TTY 1-855-534-6730**).

For the full nondiscrimination notice, go to www.amerihealthcaritasnh.com.

