



**AP EXAM FEE INFORMATION (please read carefully):**

1. AP exams are not required for MPS course credit or grade.
2. **FEES:** AP exams are \$50 each. The charge to the student is only part of the actual cost of the exam. (\$91 per exam)
3. Students who have applied and qualified for free/reduced lunch are exempt from exam fees.
4. Students whose parent has served in active military duty within the last calendar year are exempt from exam fees.
5. Students who do not qualify for free/reduced lunch but have pressing financial need may fill out a request for partial scholarship, available from the school. Funds are limited.

**The MISSED EXAM FEE RULE IS AS FOLLOWS:**

- **Students will forfeit their exam fee for any missed exams.**
- **Students who are on any type of financial aid for exam fees will not have to pay a fee for a missed exam.**

1. Once registration has been completed, refunds are not possible.

**FEE CALCULATION:**

\_\_\_ AP exams X \$50 per exam = \_\_\_\_\_

**Check below if applicable for exam fee waiver:**

I am eligible for free/reduced lunch

My parent has served in active military duty within the last calendar year

**TOTAL DUE:** \_\_\_\_\_

Checks should be made out to \_\_\_\_\_ High School. Forms and fees due by: \_\_\_\_\_.  
Additional fees will be assessed for late registrations (the difference in the exam fee with late registration from the regular fee).

**STUDENT AND PARENT/GUARDIAN, READ AND SIGN:**

I have read and understand all the information found on this registration sheet.

**Student printed name, signature and date:** \_\_\_\_\_

**Parent/guardian name, signature and date:** \_\_\_\_\_



**Complete this registration form and return to school coordinator with exam fee payment by:**

NAME (LAST/FIRST): \_\_\_\_\_ Student ID# \_\_\_\_\_ GRADUATION YEAR: \_\_\_\_\_  
 (Please print name as you would like it to appear on your IB Diploma or certificate)

GENDER: \_\_\_\_\_ ETHNICITY: \_\_\_\_\_

PRIMARY (1<sup>st</sup>) LANGUAGE: \_\_\_\_\_ SECONDARY (2<sup>nd</sup>) LANGUAGE: \_\_\_\_\_

LAST 4 DIGITS OF SSN: \_\_\_\_\_ (optional)

BIRTHDATE (mo/day/yr): \_\_\_\_\_ STUDENT PHONE: \_\_\_\_\_ PARENT PHONE: \_\_\_\_\_

STUDENT EMAIL ADDRESS (please write clearly):  
 \_\_\_\_\_

DO YOU CURRENTLY HAVE A 504 PLAN? \_\_\_\_\_

DO YOU CURRENTLY HAVE AN IEP? \_\_\_\_\_

**INDICATE THE AP EXAM(S) YOU PLAN TO TAKE IN MAY- CHECK BOX ONLY IF YOU ARE TESTING IN THAT SUBJECT**

AP ENGLISH LITEARTURE AND COMPOSITION	
AP HUMAN GEOGRAPHY	
AP US HISTORY	
AP BIOLOGY	
AP PHYSICS	
<b>AP STATISTICS ***** <u>For statistics only</u> -PLEASE INDICATE IF YOU ARE ALSO SCHEDULED TO TAKE HL HISTORY, HL MATH OR SL ESS IN THE <u>SECOND COLUMN</u>*****</b>	<b>ADDITIONAL EXAMS SCHEDULED -</b>  HL HISTORY _____ HL MATH _____ SL ESS _____



\_\_\_\_\_ PARENT CONSENT FORM : FIELD TRIPS

Date of Signature

\_\_\_\_\_ |  
Student Name

\_\_\_\_\_ |  
Student ID No

**The above - named student has my consent to take the field trip described below:**

AP Exam components may be held off campus throughout the winter and spring within walking distance of the school at MLK Rec Center and Shir Tikvah. Students will be given the exact examination schedule and will walk to the examination site and be dismissed to return to Washburn High School upon completing their exam. Washburn High School faculty will supervise the students at the exam location and students will only be excused from regular classes during the exam periods.

By signing below, I acknowledge that I understand the arrangements, and believe the necessary precautions and plans for the care and supervision of the students during the trip will be taken. Beyond this I will not hold the school or those supervising the trip responsible.

\_\_\_\_\_ |  
Parent or Guardian Signature

\_\_\_\_\_ |  
Date