

# THIS IS YOUR AP EXAM REGISTRATION FORM.

Payment is due to Mrs. Jo Anne Norton by March 20<sup>th</sup>.

**Student Name:** \_\_\_\_\_  
 (Full legal name) **Last** **First** **Middle Initial**

**Grade:** \_\_\_\_\_ **Advisor:** \_\_\_\_\_ **Home Phone #:** \_\_\_\_\_

- \_\_\_\_\_ U.S. Gov May 4 8:00 a.m.
- \_\_\_\_\_ Comparative Gov May 4 12:00 p.m.
- \_\_\_\_\_ French Lang May 4 12:00 p.m.
- \_\_\_\_\_ Spanish Lang May 5 8:00 a.m.
- \_\_\_\_\_ Comp Sci A May 5 8:00 a.m.
- \_\_\_\_\_ Comp Sci AB May 5 8:00 a.m.
- \_\_\_\_\_ Statistics May 5 12:00 p.m.
- \_\_\_\_\_ Calculus AB May 6 8:00 a.m.
- \_\_\_\_\_ Calculus BC May 6 8:00 a.m.
- \_\_\_\_\_ English Lit May 7 8:00 a.m.
- \_\_\_\_\_ German May 7 8:00 a.m.
- \_\_\_\_\_ U.S. History May 8 8:00 a.m.
- \_\_\_\_\_ European Hist May 8 12:00 p.m.
- \_\_\_\_\_ Studio Art May 8 12:00 p.m.
- \_\_\_\_\_ Biology May 11 8:00 a.m.
- \_\_\_\_\_ Music Theory May 11 8:00 a.m.
- \_\_\_\_\_ Physics B May 11 12:00 p.m.
- \_\_\_\_\_ PhysicsC-Elect May 11 2:00 p.m.
- \_\_\_\_\_ PhysicsC-Mech May 11 12:00 p.m.
- \_\_\_\_\_ Chemistry May 12 8:00 a.m.
- \_\_\_\_\_ Environ Sci May 12 8:00 a.m.
- \_\_\_\_\_ Psychology May 12 12:00 p.m.
- \_\_\_\_\_ English Lang May 13 8:00 a.m.
- \_\_\_\_\_ Art History May 13 12:00 p.m.
- \_\_\_\_\_ Macroeconom May 14 8:00 a.m.
- \_\_\_\_\_ World History May 14 8:00 a.m.
- \_\_\_\_\_ Spanish Lit May 15 8:00 a.m.

**ATTENTION PARENTS: Confidential fee waiver information.**

Maryland has entered into a fiscal contract with the College Board that allows public and private schools to provide AP exam fee waivers to students who qualify based on one of several criteria. Getting a test fee waiver means that an exam(s) can be taken at no cost to the student.

**Please review the conditions below and check all that apply to your family.**

- My child is eligible for the free and reduced lunch program.
- Our family receives assistance under Part A of Title IV of the Social Security Act.
- My child is eligible to receive medical assistance under Medicaid Program, Title XIX of the Social Security Act.
- Our family is experiencing a temporary hardship that may qualify us. *You must contact your child's School Counselor if you feel you qualify based upon a temporary hardship.*
- My child is a member of a family whose taxable income for the preceding year did not exceed 150% of the poverty level as established by the US Census Bureau. The table below lists annual family incomes, by family size, at 150% of the poverty level.

Each exam is **\$86.00**. Please use the formula below to calculate the amount you owe. Full payment must be made to Jo Anne Norton, in Guidance, by March 20<sup>th</sup>. Notify Mr. Hembree immediately of any test date conflicts. Please note late ordering and refund policies below.

Family Size	Annual Family Income	Family Size	Annual Family Income
1	\$15,315	5	\$36,195
2	\$20,535	6	\$41,415
3	\$25,755	7	\$46,635
4	\$30,975	8	\$51,855

**Total # of exams ordered:** \_\_\_\_\_ x **\$86.00 per exam = \$**\_\_\_\_\_ **due in full by March 20<sup>th</sup>.**

Form of Payment (please indicate your choice):

- CHECK # \_\_\_\_\_  CASH  EXEMPT. *If you qualify for one of the fee waiver conditions described above.*  
*Please make checks payable to Century High School*

Late orders: ANY exam ordered **after March 20** will be assessed a late fee of **\$50.00 per exam**. No exams can be ordered after April 17.

Refunds: If a student registers for an exam and cancels **before April 1**, a full refund will be issued. After this date, no refunds will be issued except for those circumstances described by the College Board in their *Late Ordering-No additional fee* policy.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_