AP EXAM REGISTRATION FORM 2018

STUDENT INFORMATION - PLEASE TURN THIS FORM INTO THE **GUIDANCE OFFICE** BY Friday, March 16th

Week

8	Session 8:00 am
May 14	8:00 am
May 14	
Wiay 14	8:00 am
Tues May 15	8:00 am
May 15	12:00 pm
Wed May 16	8:00 am
May 16	12:00 pm
Thurs May 17	8:00 am
May 17	12:00 pm
Fri May 18	8:00 am
May 18	12:00 pm
May 18	12:00 pm
	May 15 May 15 Wed May 16 May 16 Thurs May 17 May 17 Fri May 18 May 18

*stude guidel **Total** _____ Parent Signature: _____ Student Signature: _____ **REGISTRATION DEADLINE: Friday March 16th RETURN TO GUIDANCE OFFICE** QUESTIONS: Contact Ms. King at 874-6306
 Office use only

 Check amount: _____ Check #_____ Money Order #_____ OR Cash Amount: ______
 Received by:

If you meet any of the bulleted criteria below, your student would qualify for AP fee reductions. There is no actual fee reduction application; however, you would need to provide proof of income qualification such as income tax information or verification that your family receives assistance. If you have questions concerning the AP exams please contact Ms. King at eking@eriesd.org or 874-6306.

- The student's family receives assistance under Part A of Title IV of the Social Security Act.
- The student is eligible to receive medical assistance under the Medicaid program under Title XIX of the Social Security Act.
- The following table lists annual family incomes by family size, at 185 percent of the poverty level. If the AP student's family's income did not exceed the amount listed in the appropriate row and column, he or she qualifies for an AP Exam fee reduction.

Size of Family Unit	Annual Family Income*
1	\$22,311
2	\$30,044
3	\$37,777
4	\$45,510
5	\$53,243
6	\$60,976
7	\$68,709
8	\$76,442

^{*}For families/households with more than 8 people, add \$7,733 for each additional person