

ADVANCED PLACEMENT PROGRAM 2012 EXAM FEE-WAIVER POLICY

Due to a recent change in a Federal Grant, Fee Waiver Students **pay \$15.00 per exam for the first three exams and \$53.00 per exam for each exam beyond 3.** To qualify for the waiver, Enloe students who meet one of the criteria below must turn in their registration and noted documentation to Ms. Tolomeo in the Media Center before March 16, 2012.

Any of the criteria listed below are allowed by the U.S. Department of Education for determining qualification for AP Exam Fee Waivers. Please mark the criterion that qualifies you for a waiver of AP exam fees and provide the noted documentation to Ms. Tolomeo in the Media Center.

- The student is eligible for **free or reduced-cost school lunches.**
 Documentation: Copy of letter from Child Nutrition Services.

- The student's family receives assistance under part A of title IV of the **Social Security Act.**
 Documentation: Copy of recent monthly check or letter from agency confirming benefits.

- The student is eligible to receive medical assistance under the **Medicaid** program under title XIX of the Social Security Act.
 Documentation: Copy of recent monthly check or letter from agency confirming benefits.

- The student is a member of a **family whose taxable income for the preceding year did not exceed 185% of the poverty level** as established by the U.S. Census Bureau. The table below lists annual family incomes, by family size, at 185% of the poverty level. If the AP student's family income did not exceed the amount listed in the appropriate row and column, he or she qualifies for a fee waiver. (Recent unemployment of a family wage earner may also be taken into consideration.)
 Documentation: Copy of completed **2010** federal income tax return.

Size of Family	Annual Family Income (Adjusted Gross)
1	\$ 20,147
2	\$ 27,214
3	\$34,281
4	\$41,348
5	\$48,415
6	\$55,482
7	\$62,549
8	\$69,616

For family units with more than eight members, add the following dollar amount for each additional family member: \$7,067.

Parent Statement

I confirm that my child meets the criteria checked above for receiving an AP Exam Fee Waiver and have provided the required documentation.

Student's Name (printed): _____

Parent/Guardian Name (printed): _____

Parent/Guardian Signature: _____

Submit this completed form with appropriate documentation and your AP Exam Registration form to Joan Tolomeo in the Media Center no later than March 16, 2012.

OFFICE: Fee Waiver Approved Fee Waiver Declined: _____

Initial: _____ Date: _____