

Frederick County Public Schools

ADVANCED PLACEMENT PROGRAM 2019-2020 Test Fee Waiver Application Form

A limited number of fee waivers will be available to students. If you meet one or more of the guidelines listed below, complete and return this form ASAP but no later than **November 1, 2019** to Dr. Rumpf in the front office to be considered for a fee waiver. The cost of the exam for eligible students receiving a fee waiver is \$15 and students who apply for waivers will be expected to pay the waiver amount.

THE INFORMATION PROVIDED ON THIS FORM WILL REMAIN CONFIDENTIAL.

Name of Student _____

Exams to be taken (please list all): _____

Please check the appropriate item or items to indicate your student's eligibility:

_____ My student is eligible for the free or reduced lunch program.

_____ My family receives assistance under Part A of Title IV of the Social Security Act.

_____ My student is eligible to receive medical assistance under the Medicaid Program under Title XIX of the Social Security Act.

_____ My 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 US Census Bureau. The table below lists annual family incomes, by family size at 185% of the poverty level.

Family Income (Not to exceed this amount)

Household Size	Year
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 each additional family member add:	\$7,733

Parent Signature _____

Date _____