

2017–18 Student Eligibility Verification
Advanced Placement/International Baccalaureate Test Fee Program
California Department of Education (Rev. 11/07/17 NJUHSD)

Advanced Placement (AP) and/or International Baccalaureate (IB) Exams

AP Exam IB Exam AP and IB Exams

I. Student Information (Please Print)

<u>Last Name</u>	<u>First Name</u>	<u>MI</u>	<u>Grade</u>	<u>Date</u>
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II. The student qualifies for the AP/IB Test Fee Program

I certify need for financial assistance to pay for the AP/IB exam fees and that our household income during the preceding year did not exceed 185 percent of the federal poverty income guidelines. (See following table listing annual family incomes by family size)

III. Verification of Need – Family or Student (18 years or older, not a dependent)

I certify need for financial assistance to pay for the AP/IB exam fees and that our household income during the preceding year did not exceed 185 percent of the federal poverty income guidelines.
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For School Use Only – Review income documentation and identify source.

<p><input type="checkbox"/> Government agency – Department of Social Services, Social Security Administration, etc.</p> <p><input type="checkbox"/> Most recently filed federal income tax return</p> <p><input type="checkbox"/> Pay receipts</p> <p><input type="checkbox"/> Parent/student statement</p> <p><input type="checkbox"/> Free/Reduced Price Meal Verification</p> <p><input type="checkbox"/> Other – specify: _____</p> <p>_____ Signature of Designated School Personnel Date</p>
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* This form is to be retained by the school district for five years. The California Department of Education does not require a copy of this form.

2017–18 Student Eligibility Verification Advanced Placement/International Baccalaureate Test Fee Income Table

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*	Annual Family Income* for Alaska	Annual Family Income* for Hawaii
1	\$22,311	\$27,861	\$25,461
2	\$30,044	\$37,537	\$34,540
3	\$37,777	\$47,212	\$43,438
4	\$45,510	\$56,888	\$52,337
5	\$53,243	\$66,563	\$61,235
6	\$60,976	\$76,239	\$70,134
7	\$68,709	\$85,914	\$79,032
8	\$76,442	\$95,590	\$87,931
Each add'l family member add:	\$7,733	\$9,676	\$8,899
<p>* The figures shown under family income represent amounts equal to 185 percent of the 2017-18 federal income poverty guidelines established by the U.S. Department of Health and Human Services. These levels were published in the <i>Federal Register</i>, Vol. 82, No. 67, 4/10/17, pp. 17182-84.</p>			

<https://apcentral.collegeboard.org/ap-coordinators/exam-ordering-fees/exam-fees/reductions>