

BHS AP TESTING - FEE WAIVER REQUEST 2026-2027

This form should be emailed to jessica.floyd@knoxschools.org or turned into the School Counseling Office.

Please provide 3 business days for processing in order to meet AP Registration Deadlines:

- return by **October 27th** for a Fall or Full Year deadline of October 30, 2026
- return by **February 16th** for a Spring deadline of February 19, 2027

Limited funds may be available to assist students in paying for AP test registration fees. Students who receive free and/or reduced lunch may be able to waive or pay a reduced exam fee instead of the regular \$99 per exam.

By signing, I confirm the following:

- 1) I meet one or more of the eligibility requirements listed below to receive an AP fee reduction/waiver.
- 2) I acknowledge that fee-waiver eligibility may be audited.
- 3) I understand that if I do not take the AP exam(s) for which I registered, I **will be required to pay any testing fees charged back to the high school.**

Student Name: _____ Grade level: _____

Preferred method of Fee Waiver/Reduction notification:

STUDENT: check your preferred method of communication to receive your notification - email OR Canvas

- ☐ email (provide an email that you will frequently check): _____
- ☐ CANVAS message (students should frequently check CANVAS for messages)

PARENT/GUARDIAN: will be notified by email.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Name of AP Exam(s) Taking: _____

Check all that apply (REQUIRED):

- ☐ The student is enrolled in or eligible for the Free and Reduced-Price Lunch program.
- ☐ The student is enrolled in a federal, state or local program that aids students from low-income families (e.g., TRIO programs such as Upward Bound).
- ☐ The student's annual family income falls within the Income Eligibility Guidelines set by the USDA Food and Nutrition Service (provided at collegeboard.org/satfeewaivers).
- ☐ The student's family receives public assistance.
- ☐ The student lives in federally subsidized public housing or a foster home or is homeless.
- ☐ The student is a ward of the state or an orphan.
- ☐ **Other:** The student's family situation currently prohibits fee payment/financial hardship. *** If this option is selected, please explain by attaching a brief statement that addresses the hardship reason. ***

