

2025 AP Exam Registration

Registration Form & Payment Due: NOVEMBER 1, 2024

My signature below gives the AP Coordinator permission to order my son/daughter the following Advanced Placement exam(s) listed below. Once the test is ordered, I understand that I will be charged \$40 per test if my son/daughter orders the wrong test, decides not to test, does not show up on exam day and/or forfeits the exam. I understand that if my son/daughter arrives late to testing he/she will not be admitted according to AP guidelines.

STUDENT INFORMATION

Student Name: _____
Full Legal Name _____ Last _____ First _____ M.I. _____

Grade: _____ Phone Number: _____

EXAMS

Please place a check next to each exam you will be taking:

___ English Literature & Composition – Wednesday, May 7 @ 8AM

___ Calculus AB - Monday, May 12 @ 8AM

___ Pre- Calculus - Tuesday, May 13 @ 8AM

___ Physics 1: Algebra-Based - Friday, May 16 @ 8AM

FEES

Check One:

___ Regular Exam: \$100 per exam

___ Fee-Reduced Exam*: \$0 per exam.

**Student has qualified for free or reduced-price lunch programs.*

Total # of Exams Ordered: _____ Total Amount Due: _____

Final Deposit Due By: NOVEMBER 1, 2024

Check amount: _____ Check number _____ OR cash amount: _____

Received by: _____

Please make checks payable to: **MARATHON HIGH SCHOOL**

Exams canceled after November 15 and/or not taken in May will be assessed a \$40 cancellation fee.

ACCOMMODATIONS

If you have an IEP or 504 plan and have requested and been approved by The College Board for testing accommodations, please provide your SSD code here: _____

If you are in need of accommodations, please see Ms. Aune no later than November 15, 2024.

SIGNATURES

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____