

# Carter High School

## Spring AP Exam Order Form

All students must return this form with payment to Ms. Davenport by February 28.

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Grade: \_\_\_\_\_

Do you have financial need for the AP Exam? **YES** **NO**

If YES, you **MUST** fill out a *Request for AP Exam Financial Assistance Form (attached)*

**Please circle the exam(s) you plan to take below.**

ONLY register for **BOLD, GRAY** SPRING AP Courses in which you are currently enrolled.

*Fall Course Exams have already been ordered.*

Date	Time	Test	Cost
<b>Monday, May 4</b>	<b>8:00 AM</b>	<b>US Government &amp; Politics</b>	<b>\$94 // \$23</b>
<b>Tuesday, May 5</b>	<b>8:00 AM</b>	<b>Calculus BC</b>	<b>\$94 // \$23</b>
<b>Tuesday, May 5</b>	<b>12:00 PM</b>	<b>Human Geography</b>	<b>\$94 // \$23</b>
<b>Wednesday, May 6</b>	<b>8:00 AM</b>	<b>English Literature &amp; Composition (12th Grade)</b>	<b>\$94 // \$23</b>
Wednesday, May 6	12:00 PM	European History	\$94 // \$23
<b>Friday, May 8</b>	<b>8:00 AM</b>	<b>US History</b>	<b>\$94 // \$23</b>
Monday, May 11	8:00 AM	Biology	\$94 // \$23
<b>Wednesday, May 13</b>	<b>8:00 AM</b>	<b>English Language &amp; Composition (11th Grade)</b>	<b>\$94 // \$23</b>
		<b>TOTAL DUE</b>	<b>\$ _____</b>

Exams can be **paid for online** on the CHS website or make **checks** and **money orders** out to Carter High School. Please include your **name** and the **exam(s)** you are taking in the memo line. If you pay in **cash**, please bring **exact change**. *If you pay through School Cash Online, the cost of the exam will be \$98 (full price) and \$25 (reduced price) to cover SchoolCash surcharge fees.*

**No refunds will be given if you do not show up for the test.**

**You will also be required to pay the \$15 unused exam fee.**

**Orders placed late will incur a \$40 late fee.**

**You only need to apply for financial aid once per school year.**

**If you submit an approved form in the fall, you will automatically qualify for assistance in the spring.**

**Carter High School**  
Request for AP Exam Financial Assistance

**If you are approved, you will receive an approval notice from Ms. Davenport and then you may submit payment for the approved amount listed on the notice.**

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Student's Name

Student's Signature

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Parent Name

Parent Signature

**Once the AP exams are ordered, if the student does not take the exam, the family is responsible for the full cost of the exam.**

I am requesting:     \_\_\_\_\_ **Full Financial Assistance** (\$23 price for all exams)

\_\_\_\_\_ **Partial Financial Assistance** (This means I can pay full price for one exam (\$94) but would like the discounted rate for the rest of the exams. This is helpful for families paying for multiple exams who might not otherwise qualify for financial aid.)

**Demonstration of Financial Need** (please check all that apply)

\_\_\_\_\_ I have received or am eligible to receive an ACT or SAT testing fee waiver.

\_\_\_\_\_ I am eligible for ***and enrolled in*** the Federal Free or Reduced Price Lunch Program

\_\_\_\_\_ Other--Describe below any circumstances that would assist us in understanding your situation and reason to request financial assistance. (Attach additional sheet if necessary). **A request for assistance is not a guarantee, as we must consider all requests. However, please assume that your request has been approved unless you hear otherwise from the AP Coordinator.**

**Questions?**

Contact Emily Davenport

emily.davenport@knoxschools.org

865-933-3434 x 72017

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**School Use Only**

\_\_\_\_\_ Approved

\_\_\_\_\_ Denied