2025/2026 AP Exam Payment Form

\$99.00 per exam

Total Exams Ordered:



<u>All students</u> in an AP course must complete this form for each term registered in an AP course. If this form is not completed and returned by the registration deadline, students will be registered for the AP Exam and will be responsible for any exam fees

Name:	Grade: 9 10 11 1	2 Student II):	
Name of AP Class(es)	<u>Term</u>	Wanting	Wanting to Take AP Exam	
		Yes	No	
		Yes	No	
		Yes	No	
The deadline to register for AD everys is as fall		ams To Be Taken:		
The deadline to register for AP exams is as follows.				
o November 1, 2025, for classes that beg				
• February 1, 2025, for classes that will				
o March 10, 2025, for classes that will be	_	D (102D) b 4b-		
Please return this completed form to Ms. Elgers		· · · · · ·	~	
along with a check payable to Lincoln High Sch		gh Skyward Famil	ly Access.	
An additional fee will be assessed for late regist	* *			
Full refunds will not be issued for canceled regi			~	
that are returned unused, and Lincoln High Sch	•	sing fee. Partial re	funds will be issued	
after the College Board receives and clears fina		1	G. 1	
Occasionally, extreme circumstances require stu			· · · · · · · · · · · · · · · · · · ·	
charged an additional \$45 fee per alternate exar	n, depending on the reaso	n for late testing.	ine College Board	
determines the late fee assessment.	1. 1		· · · · ·	
Students are responsible for finding the testing exam.	dates and rooms and repo	rting to the testing	room on time for each	
Fee Waiver Request: Students receiving Free or below, I am requesting a fee waiver for the 2025 AF nembers administering AP testing to verify my free will still be the responsibility of the student or pare	P exams. By signing this for and reduced lunch status	orm, I understand	I am allowing staff	
Guardian Signature:		Date:		
FOR OI	FFICE USE ONLY			

Total Amount Paid: Cash/Check #: