

Application for Waiver of IB and/or AP Exam Fees

Students who have been approved for free or reduced-price meals through Charlotte-Mecklenburg Schools Child Nutrition Services are eligible to receive a waiver of IB and/or AP exam fees. Each applicant's waiver form must be accompanied by a current copy of the free or reduced-price lunch confirmation letter from CMS Child Nutrition and turned into your school's testing coordinator or IB Coordinator. By attaching the letter from Child Nutrition you are disclosing to the school's testing coordinator or IB Coordinator, your child's eligibility for free or reduced-price meals. This information will not be shared with any other entity or program.

Fee waiver forms and lunch confirmation letters are due to the high school by the dates listed below...**forms received after these dates will NOT be accepted.**

- **IB Exams – November 1, 2012**
- **AP Exams – February 15, 2013**

Please note: submission of this signed form indicates your student's intent to take the stated exam(s). If the student indicated fails to take the exam(s) listed, that student is responsible for any cancellation fees charged by the College Board and/or the International Baccalaureate Organization.

In order for this waiver request to be considered, a copy of the free or reduced-price lunch confirmation letter from CMS Child Nutrition must accompany this form. Contact CMS Child Nutrition Office at 980-343-6041 if you need a duplicate copy of your child's free or reduced-price lunch confirmation letter. Allow at least two weeks to receive the duplicate letter by US mail...they will not fax or email the letter.

PLEASE PRINT AND COMPLETE. Partially completed forms will NOT be accepted.

Student Name _____

Student ID # _____ School _____

Parent/Guardian Name _____

My student plans on taking the following IB and/or AP exam(s)...please list each exam clearly:

IB Test Name(s)

AP Test Name(s)

I hereby apply for a waiver of the CMS IB and/or AP exam fees and affirm the information provided is accurate.

Parent/Guardian Signature

Date