

2015 CRLS AP Exam Registration JAN 6, 2015 – FEB 6, 2015

STUDENT INFORMATION (PLEASE PRINT)

Student Name: _____
Last First M.I.
E-mail: _____
Grade: _____ Homeroom: _____ Home phone: _____
Learning community: C R L S Student
Cell: _____
Street address: _____ Zip code: _____

FEES

Check One:

- ☐ Regular Exam: \$91 per exam
☐ Fee-Reduced* Exam: \$15 per exam**
• *Student has qualified for free or reduced-price lunch program OR has documentation to show financial need.
• **If you don't know you qualify for reduced fee, see Ms. Madden directly. (Room 2317)

LIST ALL ONLY THE EXAMS YOU PLAN TO TAKE THIS 2014-15 SCHOOL YEAR

Check	COURSE NAME	TEACHER	SPRING OR FALL?
_____	1. _____	_____	_____
_____	2. _____	_____	_____
_____	3. _____	_____	_____
_____	4. _____	_____	_____

TOTAL TESTS _____

ORDERED: _____

TOTAL AMOUNT _____

DUE: \$ _____

DEADLINE FOR THIS FORM: FEBRUARY 6, 2015

Please make checks payable to: "CRLS AP PROGRAM" (NO CASH ACCEPTED!)

MANDATORY PRE-ADMINISTRATION SESSIONS (ON MCAS DAYS)

All students must participate in a pre-administration session to complete exam-related paperwork.

Please place an X next to the pre-administration session you would plan to attend:

MARK YOUR PERSONAL CALENDAR!!!!

ONE DAY DURING THE WEEK OF APRIL 6-10 2:30 – 3:30

CANCELLATION POLICY

Request via email: smadden@cpsd.us

- Before March 13 all but \$15 will be refunded.
- After March 13 no refunds.

SIGNATURES

Student Signature: _____ Parent/Guardian Signature: _____

REGISTRATION RECEIVED AFTER FEB 6, 2015 WILL REQUIRE
AN ADDITIONAL \$30 LATE FEE

