**Student Name: ________________________________**

**IMPORTANT!!!!**

YOU MUST TAKE YOUR AP EXAMS AT THE NATIONALLY SCHEDULED TIME. AP DOES NOT ALLOW MAKE UPS FOR ACTIVITIES OR FAMILY CONFLICTS.

**PAYMENT:** The 2019 AP Exam fee is $98 per exam. Students who qualify for Free or Reduced Lunch pay $19 per exam.

**SCHEDULE:** Because exams MUST be taken at AP’s scheduled time, some extend BEFORE or AFTER school hours. Exact times will be announced in April. LATECOMERS WILL NOT BE ADMITTED AND NO ONE WILL BE DISMISSED EARLY. Plan all other activities accordingly. Dr. Knittel will keep this form, so please make careful note of your exam schedule. **If you are scheduled for 2 exams at the same time, please inform Dr. Knittel.**

**PRE-ADMINISTRATION SESSION:** In April, ALL examinees (exception Studio Art) are REQUIRED to participate in a pre-administration session. The goal of the pre-administration is to get the bubbling out of the way so you can come in and TEST. I hope this will help with the test anxiety and eliminate the WAIT time for bubbling!

**JOBS, APPOINTMENTS, ACTIVITIES:** No adjustments will be made in either exam or Pre-Administration Session schedules. YOU must take the responsibility to plan ahead. **EXCEPTION:** Sanctioned CHSAA sports, please see Dr. Knittel immediately with sporting event conflicts!!

**CALCULATORS:** Only AP approved calculators are accepted at AP exams requiring the use of a calculator. PLEASE COME PREPARED WITH CALCULATORS AND EXTRA BATTERIES. Please refer to the AP student site at www.collegeboard.com/ap/calculators for the most current list of approved graphing calculators.

**TESTING SITE:** The 2019 AP Exam testing locations is TBD. A schedule of testing sites will be posted by mid April. Testing sites are subject to change based on space availability. If you take an AP Class at another high school, you should register to take that exam with that high school unless we offer that exam at TVHS.

TVHS AP Students, thank you for working hard at TVHS and taking the most rigorous and challenging classes at Thompson Valley High School. Your courage, work ethic, and determination are commendable. **YOU DEFINITELY SOAR WITH THE EAGLES!**

Please call or email Dr. Bernadine Knittel, AP Coordinator with questions and/or concerns. (970) 613-7910/bernadine.knittel@thompsonschools.org.
AP EXAM SECURITY STATEMENT OF AWARENESS

For your order to be accepted, **every student** must agree to the following by initialing each blank. Because it involves possible confiscation of personal items, the **parent** must also initial the first item. Read this carefully—AP makes NO exceptions.

P_______ S_______ We agree that NO prohibited items will be brought to the exam, including (but not limited to) CELL PHONES, beeper watches, iPods, etc. **WE ACCEPT THAT ANY VIOLATION OF THIS RULE WILL RESULT IN DISMISSAL FROM THE EXAM, LOSS OF EXAM FEES AND IMMEDIATE CONFISCATION OF THE ITEMS, WHICH WILL BE TURNED OVER TO AP** for their security investigation.

S_______ I agree that the ONLY places I will be during the entire exam period, (including the break) are the exam room or the assigned restroom.

S_______ During the break between exam sections, I agree to not use a phone, computer, IM, etc., or discuss the exam with **anyone**, including teachers.

S_______ I agree to not discuss the free-response section of the exam with **anyone**, including teachers, and I will **NEVER** reveal the multiple-choice questions to **anyone**, INCLUDING MY AP TEACHERS.

AP is serious about this! Because it costs over a MILLION DOLLARS to develop a replacement exam, AP will take legal action against **anyone** who compromises the security or secrecy of exam questions. You’ve worked hard for this—don’t throw it away through carelessness!

We are making a firm commitment to follow the payment, pre-administration session and exam schedules. We agree to strictly follow AP’s exam instructions and security procedures. We have **READ and COMPLETED** this **ENTIRE** form. By signing below, we are agreeing that this student will NOT bring a cell phone or any electronic device, with the exception of approved calculators, to the AP exam.

_______________________  ______________  __________________________  ______________
Signature of AP Student    Date               Signature of Parent or Guardian  Date

Please return completed form to Dr. Knittel in the Counseling office. **Students will not be allowed to test without this form completed and turned in. Students will receive their AP Student Guide to AP Testing at time of submission of this form.**