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OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION

Secondary Education and Pathway Preparation Old Capitol Building

PO BOX 47200

Olympia WA 98504-7200

**2022-23 ADVANCED PLACEMENT, CAMBRIDGE INTERNATIONAL and INTERNATIONAL BACCALAUREATE TEST FEE PAYMENT**

**LOW-INCOME STUDENT VERIFICATION**

The United States Department of Education provides funds for eligible students to offset the cost to Advanced Placement (AP), Cambridge International (CI) and International Baccalaureate (IB) examinations for the year 2022-23 testing session. Complete this form and attach appropriate documentation to verify an AP/CI/IB candidate’s eligibility for this program.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Program (check one): | Advanced Placement | International Baccalaureate | | |
| CANDIDATE’S LEGAL NAME | | | PARENT OR GUARDIAN’S NAME | |
| Gender: Male F  Ethnicity: African American | emale  Asian/Pacific Islander | Hispanic | Native American Caucasian Other Not Disclosed | |
| SCHOOL NAME | | | WORK PHONE | HOME PHONE |
| ADDRESS | | | CITY, STATE, ZIP | |

Select method used to determine low-income student eligibility for the AP/IB Test Fee Payment program:

Current **Free and/or Reduced Lunch** eligibility.

Student’s family receives assistance under Part A of Title IV of the **Social Security Act**.

Student is eligible to receive medical assistance under the **Medicaid program** under Title XIX of the Social Security Act.

**Family Declaration of Income** – (see chart below for income levels)

Parent/guardian signature below certifies that the above-named student’s family taxable income (before tax deductions) does not exceed the 2021-22 income level listed below in relation to the size of the family unit.

Signature of Parent/Guardian Date

**July 1, 2022 – June 30, 2023 Annual Low-Income Levels**

|  |  |  |  |
| --- | --- | --- | --- |
| Size of Family Unit | Family Taxable Income | Size of Family Unit | Family Taxable Income |
| 1 | $25,142 | 5 | $60,070 |
| 2 | $33,874 | 6 | $68,802 |
| 3 | $42,606 | 7 | $77,534 |
| 4 | $51,338 | 8 | $86,266 |

*\*For family units with more than 8 members, add $8,732 for each additional family member.*

**For School Use Only**

Signature of teacher, coordinator, or school/district administrator responsible for documenting student eligibility signifies that this confidential document is only to be used for verification of low-income student eligibility for the federal AP/CI/IB Test Fee Payment Program. This form and documentation for all methods used to determine low-income student eligibility will be kept in a confidential file at the school or district level. This record and documentation to confirm low-income status is subject to audit. Under ESEA Title I provisions, records must be kept for five years.

Signature of Teacher, Counselor, School/District Administrator Responsible for Documenting Low-Income Student Eligibility

Date

FORM SPI 1616 (Rev. 9/22)