## John F. Kennedy High School Request for Fee Waiver or Subsidy for IB Exams

Your child is currently registered for one or more Advanced Placement (AP) or International Baccalaureate (IB) examinations for this school year. While we regard these exams as important capstone experiences to this college-level coursework, we also recognize that for many families, the examination fees place a heavy burden on family finances.

Students who qualify for the Federal Free and Reduced Meals (FARM) program, or for other Federal Aid programs, can apply for waivers to have their exam fees covered by the state of Maryland. Students who have a need for financial assistance but do not qualify for Federal Aid can apply for aid from the county to have their exam fees subsidized by Montgomery County based on an explanation of individual hardship.

Financial	Assistance	Eligibility	for Full	Waivers from	the State of	: Maryland:

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	free or reduced lunch program.  nce under Part A of Title IV of the Social Security Act.  ive medical assistance under the Medicaid Program
under Title XIX of the Social Sec	curity Act.
My child is a member of a f	family whose taxable income for the preceding year did
not exceed 150% of the poverty l	evel as established by the US Census Bureau. The table
below lists annual family income	e, by family size, at 150% of the poverty level.
Size of Family Unit	Annual Family Income (not to exceed this amount)
1	\$19,240
2	\$25,900
3	\$32,560
4	\$39,220
5	\$45,880
6	\$52,540
7	\$59,200
8	\$65,680
For each additional person	,
- '	y for a state-issued exam waiver, please see the garding other subsidies available from MCPS.
Student Name (print)	
Parent Signature (sign)	

For more information on this form, or on individual registration or IB testing fees, please contact me at Stacey J Wahrman@mcpsmd.org or 301-929-2159. Please return this form to the school as soon as possible.

## For students who do not qualify for Maryland State Waivers, but can demonstrate financial hardship and are requesting assistance from MCPS

Based on the number and cost of your child's exams, please estimate how much of the fees your family would be able to contribute toward the total, and how much you would like to request from Montgomery County Public Schools:

Total Exam Fee: exams totaling \$
Total family can contribute:
Total family is requesting for subsidy:
Explanation of request, based on financial hardship: (may attach documentation to this sheet—the file will remain confidential, but the county periodically audits the requests)
Student Name (print)
Parent Signature (sign)
For more information on this form, or on individual registration or IB testing fees, please contact me at <a href="mailto:Stacey_J_Wahrman@mcpsmd.org">Stacey_J_Wahrman@mcpsmd.org</a> or 301-929-2159. Please return this form to the school as soon as possible.
Sincerely,
Stacey Wahrman International Baccalaureate Program Coordinator