



Grand Island Public Schools

Advanced Placement (AP) Exam Exemption Form

Student Legal Name: _____

First

Last

Student ID #: _____ Grade: _____

I, (student name) _____ wish to be exempt from taking the following AP exam(s). **Only select the exams that you wish to be exempt from.*

- AP Macroeconomics
- AP Microeconomics
- AP Calculus AB
- AP Calculus BC
- AP Statistics
- AP Chemistry
- AP Biology
- AP Physics I
- AP Physics II

- AP World History
- AP Computer Science
- AP Psychology
- AP English Language & Composition
- AP English Literature & Composition
- AP Spanish
- AP Music Theory
- AP US History
- AP Government

In the space below, please provide reasoning as to why you would like to be exempt from the exam(s) selected above:

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

(Print) Parent Name: : _____

