

# AP Archived Score Request Form

Four years after your last AP® Exam, your AP scores are archived and are then no longer viewable in our online score reporting system. To request that your archived scores be sent to a college, university, or scholarship program, or to request only a personal copy of your scores, complete this form, and return it with your payment by mail or fax to the address or number indicated below. Please print all of the fields except "Signature." You can't order archived score reports online.

Your archived AP score report will be sent by first-class mail to the institution(s) you designate on this form within 15 business days of receipt of your request (overnight/express mailing service is not available). A confirmation copy of your AP score report will also be sent to your mailing address.

If it's within four years of your last AP Exam, go to **apscores.org** to request your scores be sent to a college.

## TEST-TAKER INFORMATION (Please print clearly.)

Your name at the time you took the exam	
Date of Birth	AP ID/AP Number (if known)
Year of Last AP Exam Taken	
Name(s) of the Exam(s) Taken	
Name(s), City (or Cities), and State(s) of Your High School(s)	
Signature (Signature of student or parent/guardian required for processing request)	Date

## CURRENT MAILING ADDRESS

Street Address	
City	State/Province
Zip/Postal Code	Country
Phone Number	
Email	
Street Address at Time of Testing (if different)	
City at Time of Testing	State/Province
Zip/Postal Code	Country

## SCORE REPORT REQUEST

☐ Check here if you want to receive a copy of your score report **only** at your mailing address. If so, don't complete the institution information below.

**You may order up to two archived score reports per form, not including your personal copy. Provide the following information for the institution(s) to which you want to send your archived scores.**

College/University/Scholarship Program Code	
College/University/Scholarship Program Name	
Street Address	
City	State
Zip/Postal Code	Country

College/University/Scholarship Program Code	
College/University/Scholarship Program Name	
Street Address	
City	State
Zip/Postal Code	Country

## PAYMENT INFORMATION

The fee for archived score reports is **\$25 per report**.

- If you designate one or more institutions above, you'll receive your personal confirmation copy at no additional charge.
- If you choose to **only** receive a personal copy at your mailing address, you must still include payment of \$25.

Indicate your method of payment below. **Return this complete form with your payment.** (Note the mailing address for each method.)

\_\_\_\_\_ Check/Money Order made payable to **College Board:**  
**Mail check/money order to College Board, P.O. Box 21535,**  
**New York, NY 10087-1535.**

\_\_\_\_\_ Charge my credit card:  
**Mail credit card payments to AP Services, P.O. Box 6671,**  
**Princeton, NJ 08541-6671 or fax 610-290-8979.**

**Check One:** ☐ American Express ☐ Discover ☐ MasterCard ☐ Visa

Name on Credit Card \_\_\_\_\_

Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_