## INTERNATIONAL BACCALAUREATE PROGRAM

### 2011 SUPPLEMENTAL ROSTER FOR NEW YORK FEE WAIVER STUDENTS

**Directions: Use this roster to list all fee waiver eligible students and submit it with the NYS Standard Voucher to:**

**Vicki Jones**
**State Education Dept.**
**89 Washington Ave.**
**Room 875 EBA**
**Albany, NY 12234**

**School Name:** _____

**City/State/Zip Code:** _____

I certify that all the students listed below have qualified for the Federal Fee waiver and that no funds were collected from these students.

_____

**School Principal**

| Please Print Name (Last, First, MI | Registration Fee | # Exams per Student | Total Dollar Amount |
|---|---|---|---|
| | $141.00 | _____ @ $96 per exam | |
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# IB Fee Waiver Roster Continuation Sheet

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