



School Code: _____

AP[®] Exam Question Ambiguity and Error Form

AP Exam questions are developed and reviewed carefully by qualified education professionals. However, if you believe there is a problem with a question, complete as much of the following information as possible. Mail or fax this form to AP[®] Assessment Development. Please print all of the fields except Signature. Your form must be received **no later than June 15 of the year in which you took the AP Exam**. All communications will be answered by regular mail.

AP Assessment Development, P.O. Box 6671, Princeton, NJ 08541-6671 Fax: 610-290-8979

Exam Information

Exam Title: _____

Exam Section (multiple choice or free response): _____

Form Code (lower right corner of booklet front cover or CD): _____

Question Number: _____

Description of Ambiguity or Error

Student Information

AP Number: _____ Email: _____ Phone Number: _____

First Name: _____ Middle Initial: _____ Last Name: _____

Street Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____ Country: _____

Signature: _____

(Signature of Student or Parent/Guardian required for processing request)

School Information

School Name: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____ Country: _____

ETS USE ONLY: Do not write in this area.

From: AP Services

Action: _____

Info cc: Ops Coord _____ Prog Dir _____

Stat Analysis _____ Other _____

Test Devel _____ Date Forwarded _____