



## NORTH WARREN REGIONAL SCHOOL DISTRICT

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### ADVANCED PLACEMENT TESTING REIMBURSEMENT VOUCHER 2025 TESTING PERIOD

STUDENT NAME\* \_\_\_\_\_ GRADE \_\_\_\_\_

NOTE: Only test taken in 2025 and earning scores of 4 and 5 will be reimbursed

AP Test Taken	Score	Cost

Requests must be submitted on or before October 25, 2025 to receive reimbursement.

**A copy of the test(s) score(s) MUST be attached to this voucher to receive reimbursement. \*One student per reimbursement voucher**

Name of Parent to be reimbursed: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

**Mail to: North Warren Regional c/o Sotie Hambos, PO Box 410, 10 Noe Road,  
Blairstown, NJ 07825 (or) Fax to: 908-362-8744 (or) Email to: [shambos@northwarren.org](mailto:shambos@northwarren.org)**

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For Office Use:

Amount Reimbursed: \_\_\_\_\_ Check #: \_\_\_\_\_ Date Paid: \_\_\_\_\_