

# Philadelphia SIS Project:

## Online Registration Stepper for Parents

*To facilitate registration for the 2020-2021 school year, parents and guardians are now able to submit applications and documentation online for new students only. Separate processes are in place for students already enrolled in District schools.*

### **Navigation**

1. Parents and guardians will access the Online Registration tool via the Office of Student Enrollment and Placement's website ([philasd.org/studentplacement](http://philasd.org/studentplacement)). Scroll to the bottom of the screen to view the Registration and Placement Options section. Click on the link labeled *Registration*.



2. The Online Registration page includes multiple resources for parents and guardians who are preparing to register their student for the upcoming school year. To access the the Online Registration tools click on this icon:



## Creating a New Online Registration

1. A pop-up will appear. Click **Start New Registration**.

**SCHOOL DISTRICT OF PHILADELPHIA ONLINE REGISTRATION KIOSK**

Welcome to the School District of Philadelphia's Online Registration Kiosk! Please select whether you are starting a new application or if you are returning to finish an existing application.

**Start New Registration**    Return to Saved Registration

2. Review the guidance included on this page. Ensure you will have the ability to attach the required documents to your Online Registration application. Note the information you will need to keep should you need to re-access the application at a later date.

**Welcome to The School District of Philadelphia's Online Registration System**

This form is **only** intended for new students registering at the School District of Philadelphia. It is not intended for use by existing students in the School District. If you need to update your student's household or demographic information, please contact your school directly.

This application **cannot** be used to apply for charter schools. The Citywide and Special Admissions schools listed in the chart below will not be participating in Online Registration. Please visit the [School Directory](#) to find more information on applying for these schools.

Citywide and Special Admissions Schools		
ADVP at James Martin	ADVP Northwest HS	Arts Academy at Rush MS
Boston, William V. HS	Builing 11 HS	CAPSA HS
Central HS	Constitution HS	Cornell, Russell H HS
Engineering and Science HS	Inter Academics Prep	FLC HS
Garfield HS	Philadelphia HS for Girls	Jeff-Freedman Academy
HS of the Future	Lankershi HS	Masterson, Julia HS
Motivation HS	WPA HS	Overbrook Education Center
Parkway Center for Middle City College	Parkway Northwest HS	Parkway West HS
Philadelphia Military Academy HS	Robeson, Paul HS	SLA at Center
SLAHS	SLAMS	The LINC HS
The U School HS	The Workshop School	

**Please be advised** that the Online Registration system requires that you have the ability to upload the following items. You can begin the online registration process and save a partial application. **However, you will not be able to complete the application** if you do not have the ability to upload all of the required documents:

- Proof of your student's age
- Two (2) documents showing proof of your address.
- Shot (Immunization) Records

If you cannot complete the entire application at this time, the information entered into the following fields will be needed to re-access this application:

- Parent or Legal Guardian First and Last Name
- Parent or Legal Guardian Date of Birth
- Application Number (provided after you click the "Begin Registration" button)

3. Enter your first and last name, your date of birth, and the school year you are registering your child for (select 20-21 from the drop down menu). Also enter your email address to receive critical updates on the status of your application. Find the CAPTCHA at the bottom of the page, enter the sequence of letters and numbers, then click **Begin Registration**.

**Please enter your information below to begin your registration or complete an existing registration:**

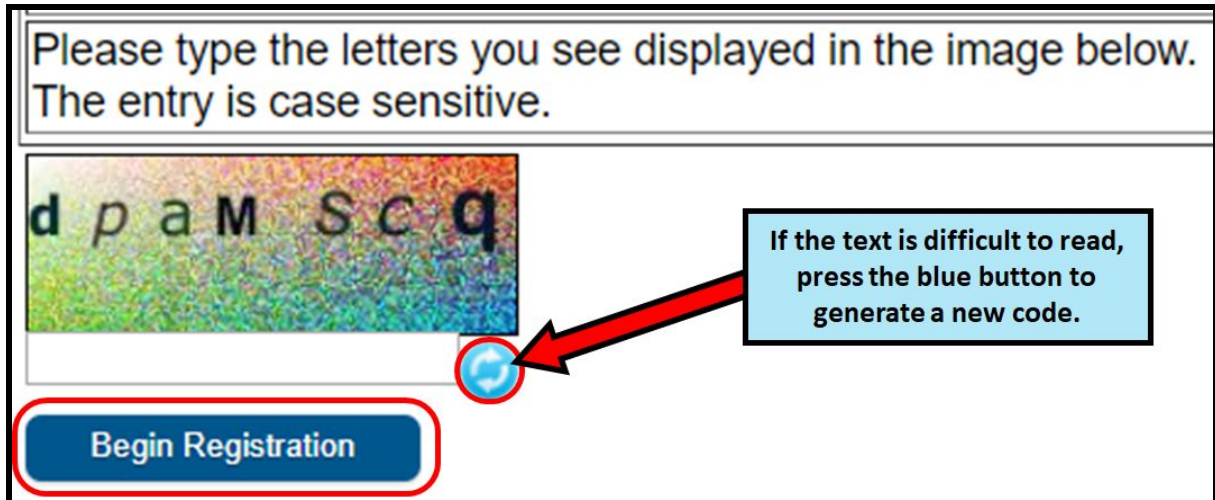
Parent or Legal Guardian First Name	Ed
Parent or Legal Guardian Last Name	Sullivan
Parent or Legal Guardian Date of Birth (MM/DD/YYYY)	11/11/1981
Registration Year	20-21
Email Address	esullivan@email.com

**Please check this box** if there are any students in your household who are **currently** enrolled in a Philadelphia District school and list them in the 'school-age sibling' section of the application.

Please type the letters you see displayed in the image below.  
The entry is case sensitive.

aw76b

**Begin Registration**



Please type the letters you see displayed in the image below.  
The entry is case sensitive.

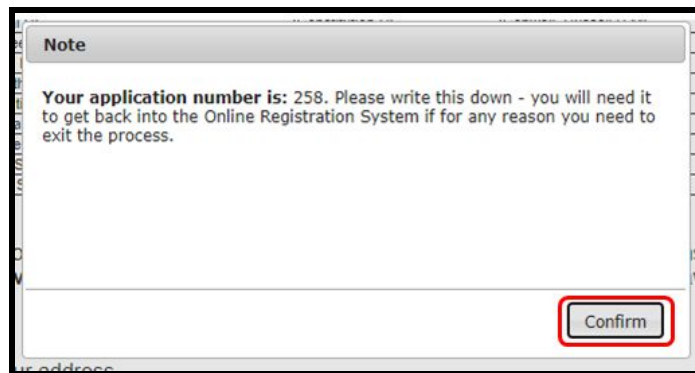
d p a m S c q

If the text is difficult to read,  
press the blue button to  
generate a new code.

Begin Registration

A red arrow points from the text box to a blue circular button with a refresh icon.

A pop-up will appear. Note your application number. Click **Confirm**.



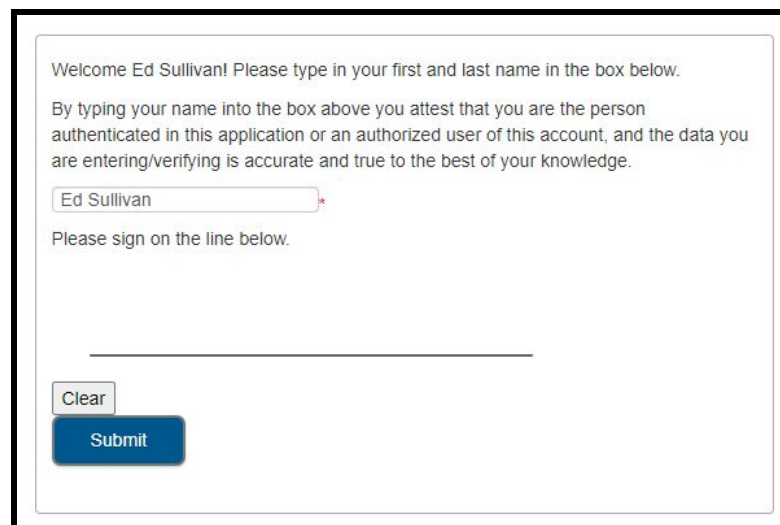
Note

Your application number is: 258. Please write this down - you will need it to get back into the Online Registration System if for any reason you need to exit the process.

Confirm

**NOTE:** The application number is used to track online registrations across the district, and does not reflect the number of online registrations at a specific school.

4. A new window will open asking for your e-signature. Enter your name and click **Submit**.



Welcome Ed Sullivan! Please type in your first and last name in the box below.

By typing your name into the box above you attest that you are the person authenticated in this application or an authorized user of this account, and the data you are entering/verifying is accurate and true to the best of your knowledge.

Ed Sullivan

Please sign on the line below.

Clear Submit

## **Adding Primary Household Information**

*The term "Primary Household" is generally where your child lives most of the time.*

1. Enter the phone number you wish to assign to your child’s primary household. Students can only have one primary household, but can have multiple secondary households. You will enter secondary household information later, if needed. Click **Save/Continue**.

\* Indicates a required field

▼ Student(s) Primary Household ▶ ◯ Parent/Guardian ▶ ◯ Emergency Contact ▶ ◯ Student ▶ ◯ Completed

▼ Primary Home Phone

Primary Home Phone  
 ( ) - \*

Next ▶

▶ Home Address

Save/Continue

2. Enter your home address by entering the *House Number*. Select the *Direction* (North, Northwest, South, Southwest, etc.) from the drop down menu, if applicable. Enter the *Street*. Do not enter anything in the *Tag* field. If your address exists in the system, it will appear in the green box. Click your address, and the rest of the fields will be automatically populated. Click ***Save/Continue***.

Student(s) Primary Household
Parent/Guardian
Emergency Contact
Student
Completed

Primary Home Phone

Home Address

Please enter the student's home address below.

As you fill in the address, the system will automatically populate a list of valid addresses, from which you will need to select the correct address. If your address does not appear in the list, please contact the District's Office of Enrollment and Student Placement at 215-400-4290.

House Number	Direction	Street	Tag (St, Ave, Blvd, etc)	Direction	Apartment
440	N	Broad			
City	State	Zip	Ext.	County	

Clear Address Fields

Click on your address if it appears in box

440 N Broad St, Philadelphia, PA 19130 4015 Philadelphia
4401 N Broad St, Philadelphia, PA 19140 1932 Philadelphia
440A N Broad St Apt. A, Clayton, NJ 08312 1102 Gloucester
440B N Broad St Apt. B, Clayton, NJ 08312 1102 Gloucester
4400 N Broad St Apt. 1, Philadelphia, PA 19140 1933 Philadelphia

You must select an address from the list above.

Your address as entered above  
440 N Broad

Previous

Save/Continue

## **Adding Parents and Guardians**

1. A popup will appear to inform you that you are about to enter Parent/Guardian information. Click **OK**.

2. Enter the appropriate information for each of your child's parents/guardians. If the parent/guardian lives in the address listed as the student's Primary Household, ensure the checkbox above the address is checked. Click **Next**.

**NOTE:** *If a parent/guardian is entered who does not live at the address listed, uncheck the box. You will then have the chance to add an address for this parent/guardian, which is designated as a Secondary Household.*

3. Enter contact information for the parent/guardian. Indicate your *Contact Preferences* by checking the appropriate boxes on the right side of the screen. Read the descriptions of each preference. DO NOT check the box under the *Private* checkbox. Click **Save/Continue**.

▼ Contact Information

At least one Phone Number is required.

Enter the contact information and check the boxes for how you would prefer to receive different types of communication from the District.

	Cell Phone	Work Phone	Other Phone	Email	Secondary Email	Emergency	High Priority	Attendance	Behavior	General	Teacher	Private
Voice	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(SMS)Text	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Voice	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(SMS)Text	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Voice	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(SMS)Text	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

4. If all required information has been entered, there will be a green check in the *Completed* column next to the parent/guardian's name. If the row appears highlighted in yellow, that means some required information is missing. Click on the name to edit. To add another parent or guardian in the system, click **Add New Parent/Guardian**, and repeat the preceding steps. When all the parents/guardians included in your application appear with a green check, click **Save/Continue**.

✓ Student(s) Primary Household ▶ ▼ Parent/Guardian ▶ Emergency Contact ▶ Student ▶ Completed

Parent/Guardian

First Name	Last Name	Gender	Completed	
Ed	Sullivan	M	✓	<a href="#">Edit/Review</a>

Please list all primary Parent or Legal Guardian's in this area.

**Yellow** - Indicates that person is missing required information. Select the highlighted row to continue.

**✓** - Indicates that person is completed.

[Add New Parent/Guardian](#)

[Back](#) [Save/Continue](#)



## **Adding Emergency Contacts**

An emergency contact is a person who should be contacted in case of an emergency if the parents/guardians cannot be reached. When completing this section, you do not need to re-enter any parents or guardians who were entered in the previous screens. These entries are in addition to parents/guardians in terms of emergency contact priority.

1. The Emergency Contact screen will load. Click “Add New Emergency Contact.” A popup will inform you that you are about to enter Emergency Contact information. Click **OK**.

2. Enter the appropriate information for your child's emergency contact.

3. Enter the person's contact information. Click **Save/Continue**.

✓ Student(s) Primary Household > ✓ Parent/Guardian > ▼ Emergency Contact > Student > Completed

**Contact Name: Lawrence Welk**

Demographics

▼ Contact Information

Enter the contact information for this emergency contact.

At least one Phone Number is required.\*

Home Phone (215 )555 -5555

Cell Phone ( ) -

Work Phone ( ) - x

Email lwelk@email.com

Previous

Delete Cancel Save/Continue

4. If all required information has been entered, there will be a green check in the *Completed* column next to the emergency contact's name. If the row appears highlighted in yellow, that means some required information is missing. Click on the name to edit. To add another emergency contact, click *Add New Emergency Contact*, and repeat the preceding steps. When all the Emergency Contacts included in your application appear with a green check box, click **Save/Continue**.

✓ Student(s) Primary Household > ✓ Parent/Guardian > ▼ Emergency Contact > Student > Completed

**Emergency Contact**

First Name	Last Name	Gender	Completed	
Geezer	Butler	M	✓	Edit/Review

**I** - In an Emergency, if a parent or legal guardian cannot be contacted, one of the emergency contacts listed here will be called.

Proper identification will be required before a student is released to emergency contacts.

At least one (1) emergency contact is required.

**Yellow** - Indicates that person is missing required information. Select the highlighted row to continue.

✓ - Indicates that person is completed.

The maximum number of Emergency Contacts is 4

Add New Emergency Contact

Back Save/Continue



## **Adding Student Information**

In this section, you will be able to add important information for the student you are registering.

1. Read the warning and note that the District's policy for online registration is **one student per application**. Separate applications must be submitted for each school-aged child you wish to register. Applications with more than one child will be denied and must be resubmitted correctly. Click **Add New Student** to proceed.

Student

First Name	Last Name	Gender	School	Completed
<p><b>WARNING!</b></p> <p>The Online Registration Tool can only process <b>One (1)</b> student per application. Applications submitted with more than <b>One (1)</b> student in this section will be <b>DENIED</b>. Please list all other school-age children within the 'School-Age Sibling' section on the next page.</p> <p>If you wish to register any additional students for this school year, please complete this application and submit a new application for each additional student.</p> <p>After you have finished uploading your student's documents, you will return to this screen. Click 'Save and Continue' to complete the application.</p> <p><b>Yellow</b> - Indicates that person is missing required information. Select the highlighted row to continue.</p> <p><b>✓</b> - Indicates that person is completed.</p>				

Add New Student
Back

2. Read the information about school catchments on the next screen.

✓ Student(s) Primary Household
✓ Parent/Guardian
✓ Emergency Contact
▼ Student
Completed

Student Name: Barbara Walters

Demographics

Please enter your student's information below. The student's name should be entered exactly as it appears on the birth certificate. If your student has two last names, please enter both in the box marked "last name."

The student's neighborhood school will automatically be determined based on the student's home address.

**Note:** If no neighborhood school is found for your student, please complete the application as normal. Someone from the Office of Student Enrollment and Placement will reach out to you about your student's school assignment. 11th Grade Students Assigned to Strawberry Mansion HS will be reassigned to Roxborough HS at processing.

**Please be Advised that** some schools in our district have overlapping catchment areas for some grades. In these cases, the online registration system may assign your student to the incorrect school. If this occurs for your student, the Office of Student Enrollment and Placement will ensure that your application is given to the appropriate school. Once assigned, you will be contacted by the correct neighborhood school regarding next steps to complete registration. Please see the below table for details on the schools this will affect:

ES Name	ES Grades	MS Name	MS Grades	Overlapping Grades
Jenks, Abram	K-5	Fel, D Newlin	K-8	K-5
Prince, Thomas M	K-6	Rhodes, E Washington	K-8	K-6
Wright, Richard	K-5	Rhodes, E Washington	K-8	K-5
Emm, Eleanor C	K-5	Roosevelt, Theodore	K-8	K-5
Logan, James	K-5	Roosevelt, Theodore	K-8	K-5
Kelly, John B	K-5	Roosevelt, Theodore	K-8	K-5
King, Francis Scott	K-6	Southwark	K-8	K-6
Catharine, Joseph	K-5	Tilden, William	5-8	5
Morton, Thomas G	K-5	Tilden, William	5-8	5

3. Enter all required student information as well as any other information in the relevant fields. The system will list the neighborhood school where your application will be submitted on this screen, based on the address you provided and the grade level indicated in this section. Click **Next**.

The screenshot shows a form with a table at the top and several input fields below. A red box highlights the following fields:

Catherine, Joseph	K-5	Tilden, William	5-8	5
Morton, Thomas G	K-5	Tilden, William	5-8	5

Below the table, the red box highlights the following fields:

- Legal First Name: Barbara
- Legal Middle Name: (empty)
- Legal Last Name: Walters
- Suffix: (empty)
- Gender: Female
- Date of Birth: 08/11/2015
- Date Entered U.S.: (empty)
- Country of Birth: (empty)
- Enrollment Grade: Kindergarten

Below the red box, the text "Assigned school is: Waring, Laura W. ES" is visible. At the bottom left, a "Next" button is highlighted with a red box.

4. Enter your child's Race/Ethnicity information. Select *Yes* or *No* from the drop down menu, indicating whether or not your student is Hispanic/Latino. Then, check any and all of the checkboxes which apply. **If you selected No from the drop down, you must check at least one option from the list.**

The screenshot shows a form titled "Race Ethnicity". A red box highlights the following elements:

- A dropdown menu labeled "Is Hispanic/Latino" with "Yes" selected.
- Text: "Please check all that apply. If not Hispanic, at least one is required."
- Checkboxes:
  - ☐ American Indian or Alaska Native
  - ☒ Asian
  - ☐ Black or African American
  - ☐ Native Hawaiian or Other Pacific Islander
  - ☒ White

At the bottom, "Previous" and "Next" buttons are visible, with the "Next" button highlighted by a red box.

5. Indicate your housing status by clicking the appropriate checkbox. Click **Next**.

The screenshot shows a form titled "Housing". A red box highlights the following elements:

- Text: "Please indicate if your living situation falls into any of the following categories."
- Text: "Certain categories may provide rights and services under the McKinney-Vento law. If eligible, you will be contacted by a member from the Education for Children and Youth Experiencing Homelessness program."
- Text: "Please check all that apply."
- Checkboxes:
  - ☐ Rent
  - ☐ Lease
  - ☐ Own / Mortgage
  - ☐ Living with Family or Friend
  - ☐ Living with Family or Friend Due to Hardship
  - ☐ In Motel / Hotel Due to Hardship
  - ☐ Experienced Disaster / Fire
  - ☐ Experienced Eviction
  - ☐ In a Shelter or Transitional Housing Program
  - ☐ Child Living with Someone Other Than Legal Guardian or DHS (Known as Unaccompanied Youth).
  - ☐ Other Homeless Situation

At the bottom, "Previous" and "Next" buttons are visible, with the "Next" button highlighted by a red box.

6. Indicate the relationship each parent/guardian has to the student by selecting the appropriate option from the *Relationship* drop down menu. Check the boxes under Guardian, Mailing, Portal and Messenger. Then, assign a number in the *Emergency Contact Order* drop down menu. This number is the order in which school staff will contact people in the event of an emergency.

**Relationships - Parent/Guardians**

For each person listed, enter their relationship to the student.

The check box under Guardian must be selected for at least one Person.

The Emergency Contact order must also be entered for each person listed. This will provide the school, the priority order for contacting listed persons in the event of an emergency. \*

Name	Relationship*	Guardian	Mailing	Portal	Messenger	Secondary Household	Emergency Contact Order*		No Relationship
Ed Sullivan	<div>Relationship*</div> <div>Father</div> <div>Mother</div> <div>Aunt/Uncle</div> <div>Cousin</div> <div>Family Friend</div> <div>Foster Parent</div> <div>Grandparent</div> <div>Guardian</div>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Description of Contact Preferences**

**Guardian** - Marking this checkbox will flag this person as legal guardian to the student.

**Mailing** - Marking this checkbox will flag this person to receive mailings for the student.

**Portal** - Marking this checkbox will allow the parent or legal guardian to create and access their Parent Portal account.

**Messenger** - Marking this checkbox will flag this person to receive messages from the District's messenger system pertaining to this student.

**Emergency Contact Order** - Adding a sequence number on contacts will prompt district staff to contact these persons in the order that you specify. Parents or Legal Guardians should start with a sequence of 1.

**No Relationship** - Marking this checkbox will indicate that this person does not share a relationship to the student. By checking this checkbox you are indicating that this person no longer has a relationship to the student.

Previous Next

**NOTE:** If one of the parents/guardians who appears in this section lives at a different address than the address identified as the primary residence, check the box under *Secondary Household*.

7. Indicate the relationship each emergency contact has to the student by selecting the appropriate option from the *Relationship* dropdown, then assign a priority number from the *Emergency Contact Order* dropdown. Click **Next**.

**Relationships - Emergency Contacts**

For each person listed, enter their relationship to the student.

The Emergency Contact order must also be entered for each person listed. This will provide the school, the priority order for contacting listed persons in the event of an emergency.

Name	Relationship*	Emergency Contact Order*		No Relationship
Lawrence Welk	Family Friend	2	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Description of Contact Preferences**

**Emergency Contact Order** - Adding a sequence number on contacts will prompt district staff to contact these persons in the order that you specify. Parents or Legal Guardians should start with a sequence of 1.

**No Relationship** - Marking this checkbox will indicate that this person does not share a relationship to the student.

Previous Next

8. Indicate services your child has previously received by selecting *Yes* or *No* in all the required dropdowns on this screen and click **Next**.

▼ Student Services and Enrollment History

Has your student ever received Special Education Services in PA or another state? ▼

If yes, what state did your student receive Special Education services in? ▼

Does your student have a current IEP? ▼

Does your student have a current evaluation report? ▼

Current Evaluation Report Date:

Was your student ever enrolled in an Early Intervention Program? ▼

Does your student have a current 504 plan? ▼

Has your student previously received gifted or talented services? ▼

Did your student attend Pre-Kindergarten? ▼

Did your student attend Kindergarten? ▼

Type of School last attended: ▼

Name of School last attended:

City of School last attended:

◀ Previous   **Next ▶**

9. Enter your child's medical information. Continue by scrolling down.

▼ Medical Information

Please provide the following Medical Information for your student.

Name of Child's Doctor/Clinic:

Doctor/Clinic Phone Number: (215 )555 -7777

Medical Insurance: Private ▼

Insurance Company Name: Cigna

Insurance Policy Number: 9876543210

Does your child wear glasses? Yes ▼

Does your child wear a hearing aid? No ▼

Does your child have Seizures? No ▼

Does your child have Diabetes? No ▼

Does your child have Asthma? Yes ▼

Has your child been diagnosed with ADHD? Yes ▼

Does your child have any allergies? No ▼

Please list any Other Health Problems:

Do you give permission to the school nurse to give your child Acetaminophen (Tylenol)? Yes ▼

Do you give permission to the school nurse to give your child Ibuprofen (Advil, Motrin)? Yes ▼

10. Indicate whether or not your student takes medication. If you select *No* from the drop down menu, proceed to the next statement. If you select *Yes* from the drop down menu, fields will appear where you will be able to enter medications that your child takes.

Does your child take any medications? Yes x

**First Medication**

Medication Name: Adderall

Amount / Dosage: 30 Mg

Frequency / Time: Once Daily

Medication Reason: ADHD

**Second Medication**

Medication Name: Albuterol

Amount / Dosage: 2 Mg

Frequency / Time: When Needed

Medication Reason: Asthma

**NOTE:** You will only be able to enter three medications on this screen. If you need to tell the nurse about additional medications, please reach out to the school to communicate that information after your student has been enrolled in the school.

11. Review the statements which follow. The first statement discusses permission for the administration of emergency medical treatment, as well as medications by the school nurse. It also authorizes communication between the school nurse and your child's healthcare provider. The second statement discusses permission for the use of sunscreen. Type your name into the appropriate Authorization Signature boxes. Then, click **Next**.

Your signature gives permission for emergency treatment; as well as for SDP School Nurses to administer the medications you indicated on this screen, during school hours, on field trips and after school activities. This will also authorize the school nurse to communicate with your child's health care provider and your health care provider to reply as needed regarding your child's care.

Emergency Treatment Authorization Signature: Ed Sullivan

Parents/guardians may choose to supply their child with non-aerosol topical sunscreen, if it is approved by the U.S. Food and Drug Administration. In order for a student to apply sunscreen during school hours, at a school-sponsored activity, or while under the supervision of school personnel, the parent/guardian must complete the attestations below.

- By signing below, you confirm that you understand that the school is not responsible for ensuring that the sunscreen is applied by the student.
- By signing below, you confirm that the student has demonstrated that they are able to self-apply the sunscreen.

Sunscreen Authorization Signature: Ed Sullivan

The school may cancel or restrict the possession, application, or use of a non-aerosol topical sunscreen product by a student if any of the following occurs:

- The student fails to comply with school rules concerning the possession, application, or use of the non-aerosol topical sunscreen product
- The student shows an unwillingness or inability to safeguard the non-aerosol topical sunscreen product from access by other students.

If the school cancels or restricts the possession, application, or use of a non-aerosol topical sunscreen product by a student, the school shall provide written notice of the cancellation or restriction to the student's parent/guardian.

◀ Previous   Next ▶

12. Indicate which language(s) your child speaks in each of the contexts listed. Click **Next**.

**Language Information**

Please provide the following information regarding the language(s) your student speaks, this will assist the District in determining if your student should be evaluated to receive English as a Second Language services.

Is English the language the family speaks at home most of the time? Yes ▾

Is English the language the parent(s) speak to her/his student most of the time? Yes ▾

Is English the language the student speaks to her/his parents most of the time? Yes ▾

Is English the language the student speaks to her/his brothers/sisters most of the time? Yes ▾

Is English the language the student speaks to her/his friends most of the time? Yes ▾

Is English the language the student speaks most frequently? Yes ▾

Does the student speak any other language? Yes ▾

What other language does the student speak? Latvian ▾

Has your child ever received English as a Second Language (ESL/ELL) services? No ▾

◀ Previous   Next ▶

13. Indicate whether any school-aged siblings live with your child in the Primary Household. Click **Next**.

**School Age Siblings in Same Household**

Does the Student have any school age siblings who are currently living at the address provided? No ▾

◀ Previous   Next ▶

14. The Parental Registration Statement section asks questions about your child's disciplinary history. Responses to these questions are required. Then, enter your name to swear or affirm that the information you have provided is correct to the best of your knowledge. Click **Next**.

**Parental Registration Statement**

Pennsylvania School Code 13-1304-A states in part "Prior to admission to any school entity, the parent, guardian or other person having control or charge of a student shall, upon registration provide a sworn statement or affirmation stating whether the pupil or private school of this Commonwealth or any other state for an action of offense involving a weapon, alcohol or drugs, or for the willful infliction of injury to another person or for any act of violence committed on school property."

Is your child currently suspended or expelled from any public or private school of this Commonwealth or any other state for an act or offense involving weapons, alcohol or drugs, or for the willful infliction of injury to another person or for any act of violence committed on school property? No ▾

Was your child previously suspended or expelled from any public or private school of this Commonwealth or any other state for an act or offense involving weapons, alcohol or drugs, or for the willful infliction of injury to another person or for any act of violence committed on school property? No ▾

By typing your name into the box you hereby swear or affirm to the information provided and attest that you make this statement subject to the penalties of 24 P.S. 13-1304-A (b) and 18 Pa. C.S.A 4904, relating to unsworn falsification to authorities, and the facts contained herein are true and correct to the best of my knowledge, information and belief. Ed Sullivan ▾

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15. Review the Release of Directory Information statement, then indicate whether or not you want to allow the District to release your child's information by selecting **Yes** or **No** from the drop down menu. If you select **Yes**, more options appear for you to select from. Once your selections have been made, enter your name in the Signature Authorization box. Click **Next**.

**Release of Directory Information (FERPA).**

The School District of Philadelphia may disclose appropriately designated "directory information" without written consent, unless you have advised the District to the contrary.

Directory information includes the following: name, address, phone number, date and place of birth; field of study; participation in recognized activities and sports; height/weight, if member of athletic team; dates of attendance; degrees, awards, photographs, rosters; previous school(s) attended; and primary language.

The primary purpose of directory information is to allow The School District of Philadelphia to include this type of information from your child's education records in certain school publications, including: a playbill, showing your student's role in a drama production; school newsletters, the annual yearbook; honor roll or other recognition lists; graduation program; and sports activity sheets, such as for basketball, showing weight and height for team members.

This information may also be made available to qualified outside organizations upon request. Qualified outside organizations include, but are not limited to: scholarship providers, trade/technical schools, and potential employers. In recognition of a family's right to privacy, it is the policy of The School District of Philadelphia that directory information will not be provided to commercial enterprises.

Parents or eligible students (18 years old or above) have the right to have directory information withheld upon written request.

Do you want to deny or restrict the release of directory information for your student? **If so, please select 'Yes' here to indicate which information you would like to restrict.**

☐ Do not release my student's directory information at any time. No information for school publications, school activities, or to qualified outside organizations, scholarship providers or employers.

☐ Do not release my student's directory information at any time, except for school publications, school activities and to qualified outside organizations.

☐ Do not release my student's directory information at any time, except for school publications and school activities.

☐ Do not release my student's directory information to military recruiters (11th and 12th grade only).

☐ Do not permit my child to take any surveys that concern one or more of the areas listed on the PPRA notice.

**PPRA Notice**

The Protection of Pupil Rights Amendment (PPRA), 20 U.S.C 1232h, allows you to opt your child out of participating in certain school activities. These activities include a student survey, analysis, or evaluation that concerns one or more of the following eight areas ("protected information surveys"):

- Political affiliations or beliefs of the student or student's parent
- Mental or psychological problems of the student or student's family
- Sex behavior or attitudes
- Illegal, anti-social, self-incriminating, or demeaning behavior
- Critical appraisals of others with whom respondents have close family relationships
- Legally recognized privileged relationships, such as with lawyers, doctors, or ministers
- Religious practices, affiliations, or beliefs of the student or parents
- Income, other than as required by law to determine program eligibility.

This requirement also applies to the collection, disclosure or use of student information for marketing purposes ("marketing surveys", and certain physical exams and screenings).

The School District will provide parents, within a reasonable period of time prior to the administration of the surveys and activities, notification of the surveys and activities. Parents will be provided an opportunity to opt their child out, as well as an opportunity to review the surveys.

Please type your name in the box authorizing your indicated Release of Directory Information options.

Ed Sullivan

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16. The next step is to upload documentation to validate the date of birth of your child, proof of address, and demonstrate up-to-date immunizations in line with District standards for your child's age group. Review the detailed instructions that display on this part of the application.

**Upload Required Documents**

The School District's online registration system will not let you submit your student's registration without the following required items:

1. Proof of your student's age
2. Two (2) documents showing your address
3. Current Shot (Immunization) Records. Obtain these from your child's physician if you do not have a copy.

**Please be advised** that there is a file size limit of 10MB. The following special characters cannot be included in document names, or they will not upload:  
 | . , [ ] { } ( ) ! ; \* ? < > : / \ Tab, LF, CR

[Click here for instructions on how to upload documents with an Android device.](#)

[Click here for instructions on how to upload documents with an iPhone.](#)

[Click here for information on required Immunizations.](#)

[Click here to view our Registration Guidelines](#)

**If you have any notes or comments about the documents you uploaded, please write them here:**

**Acceptable Proof of Age documents are:**

- Birth Certificate
- Baptismal Certificate
- Valid Passport

**Acceptable Residency Documentation includes:**

- Deed
- Valid Department of Transportation (DOT) identification card
- Valid Government Issued ID with current address
- Mortgage settlement sheet
- Current credit card bill
- Current utility bill (gas, electric, cable, telephone)
- Recent vehicle registration
- Recent property tax bill
- Voter Registration Card showing current address
- Valid driver's license or change of address card with your current address
- Letter from Social Security Office with current address
- IRS Statement or other wage and tax statements (e.g. W2, 1040, 1099)
- Letter from Public Assistance Office with current address
- Recent Employer Pay Stub showing current address
- Original lease with names(s) of parents/legal guardians and children
- Signed property sales agreement, followed by original copy of settlement papers within 45 calendar days of settlement
- Foster care/childcare and DHS letters are acceptable for registration when a student is in the care of a foster/child care agency
- Shelter placement or residency letters are acceptable for homeless students

**PLEASE NOTE:** One (1) of your residency documents must display a date from the last 90 days.

**NOTE:** A comments box is available for extra notes parents may want to share with school-based staff. This is important when a child is experiencing homelessness or is in foster care, and in other unique circumstances.

If you have any notes or comments about the documents you uploaded, please write them here:

17. Click the appropriate blue button to upload documents.

- [Click here for a video on how to upload using an iPhone.](#)
- [Click here for a video on how to upload using an Android phone.](#)

\*

Upload Proof of Your Student's Age

\*

Upload First Proof of Residency Document

\*

Upload Second Proof of Residency Document

\*

Upload Student Immunization Records

\*Optional

Upload Second Immunization Records Document

\*Optional

Upload Transcript or Report Card

\*Optional

Upload Photo ID of Parent/Guardian

\*Optional

Upload Student Special Ed / IEP Documentation

◀ Previous

Delete

Cancel

Save/Continue

18. If any information is missing, your child's name will appear highlighted in yellow. You can go back and enter the missing information by clicking **Edit/Review**. The birth date was missing in the example below.

✓ Student(s) Primary Household → ✓ Parent/Guardian → ✓ Emergency Contact → ▼ Student → Completed

Student

First Name	Last Name	Gender	School	Completed	
Barbara	Walters	F			<a href="#">Edit/Review</a>

Please enter all students that need to be enrolled in Kindergarten.

**Yellow** - Indicates that person is missing required information. Select the highlighted row to continue.

✓ - Indicates that person is completed.

[Add New Student](#)

[Back](#) [Save/Continue](#)

Once all information is entered, a green check will indicate the application is complete, and you can click **Save/Continue**.

✓ Student(s) Primary Household → ✓ Parent/Guardian → ✓ Emergency Contact → ▼ Student → Completed

Student

First Name	Last Name	Gender	School	Completed	
Kelly	Osbourne	F	Roosevelt ES	✓	<a href="#">Edit/Review</a>

**WARNING!**

The Online Registration Tool can only process **One (1)** student per application. Applications submitted with more than **One (1)** student in this section will be **DENIED**. Please list all other school-age children within the 'School-Age Sibling' section on the next page.

If you wish to register any additional students for this school year, please complete this application and submit a new application for each additional student.

After you have finished uploading your student's documents, you will return to this screen. Click 'Save and Continue' to complete the application.

**Yellow** - Indicates that person is missing required information. Select the highlighted row to continue.

✓ - Indicates that person is completed.

[Add New Student](#)

[Back](#) [Save/Continue](#)

**NOTE:** Registering more than one student per application is not allowed. DO NOT click the **Add New Student** button. Applications for more than one student will be rejected.

19. Your application is not submitted until you click the red **Submit** button. Review the statement prior to clicking **Submit**.

The screenshot shows the 'Infinite Campus Online Registration' interface. At the top right, it says 'Application'. Below the header, a progress bar indicates the steps: 'Student(s) Primary Household', 'Parent/Guardian', 'Emergency Contact', 'Student', and 'Completed'. A red asterisk indicates a required field. A yellow box highlights the instruction: 'You must submit your application by clicking the following button.' Below this is a red 'Submit' button. A 'PLEASE NOTE' section explains that data can be verified before submission and that information is not submitted until the submit button is clicked. At the bottom, there is a 'Back' button and a link to 'Application Summary PDF'.

20. A warning popup will appear informing you that you will not be able to modify your application once you submit. Click **Confirm** if you are ready to submit. If you need to change something or want to review your application, click **Cancel**.

The warning popup has a title bar 'Warning'. The text inside asks: 'Are you sure you that you are ready to submit this registration? You will not be able to enter and/or modify this information after submitting.' At the bottom right, there are two buttons: 'Confirm' (highlighted with a red box) and 'Cancel'.

21. When your application is submitted, you can view it in PDF form, which can be saved to your hard drive or printed.

The screenshot shows the 'Infinite Campus Online Registration' confirmation screen. At the top right, it says 'Application Number 97'. The main text says: 'Thank you for completing Online Registration! For a PDF copy of the submitted data, please click the link below.' Below this text is a link 'Application Summary PDF' which is highlighted with a red box.



## **Resubmitting an Application**

After you have submitted your application, it will be carefully reviewed by staff at the school to ensure completion and accuracy. If any part of your application is found to be incomplete, you should be contacted by someone from the school to discuss the issue. In order to move forward with completing the application, you will need to provide updated or corrected documentation. As a part of the process, the entire application will be “unsubmitted.” **An unsubmitted application will still contain all of the information you originally entered. You will not need to start the process from a “blank” application.**

When an application is unsubmitted, you will receive an email from the school informing you that either:

- Your uploaded residency documents are not acceptable
- Your uploaded Proof of Age document is not acceptable
- Your student will not be five years of age on or before 9/1/2020 (kindergarten only).
- Your student’s immunizations are incomplete

You will have the opportunity to resubmit with proper documents attached. Contact the Office of Student Enrollment and Placement with any questions at [osep@philasd.org](mailto:osep@philasd.org).

1. To return to your application, access the Online Registration tool via the Office of Student Enrollment and Placement’s website ([philasd.org/studentplacement](http://philasd.org/studentplacement)). Scroll to the bottom of the screen to view the Registration and Placement Options section. Click on the link labeled *Registration*.

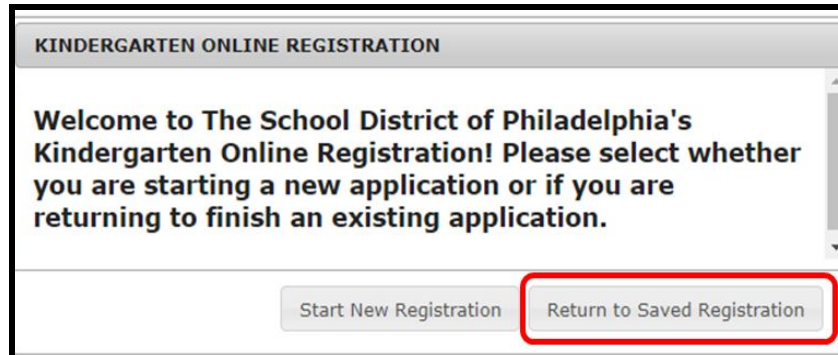




2. Find and click this icon:



3. This page will include guidance for both the traditional Enrollment and Registration Process as well as the Online Registration process. Locate the section for Online Registration. Click ***Return to Saved Registration***.



4. To access your saved registration, you will need to enter the following information for the person who originally submitted the application:
- First and last name
  - Birth Date
  - Application Number

**Infinite Campus Online Registration**

The School District's Kindergarten Online Registration system requires that you have the ability to upload the following items. You can begin the on-line registration process and save a partial application, **however you will not be able to complete the application**, if you do not have the ability to upload all of the required documents.

- Proof of your student's age
- Two (2) documents showing your address.
- Shot (Immunization) Records. Obtain this from your child's physician if you do not have a copy.

Please note, if you cannot complete the entire application at this time, the information entered into the following fields will be needed to re-access this application.

- Parent or Legal Guardian First and Last Name
- Parent or Legal Guardian Date of Birth
- Application Number (which will be provided after you click the "Begin Registration" button)

Parent or Legal Guardian First Name	<input type="text"/>
Parent or Legal Guardian Last Name	<input type="text"/>
Parent or Legal Guardian Date of Birth (MM/DD/YYYY)	<input type="text"/>
Email Address	<input type="text"/>
Do you currently have any students attending a District School?	<input type="text"/>
<b>APPLICATION NUMBER</b>	<input type="text"/>

Please type the letters you see displayed in the image below.  
The entry is case sensitive.

5. Review your application, making sure to enter accurate information and upload documents that are clear to read, in the correct places. Resubmit when all required information/documents has been successfully included.