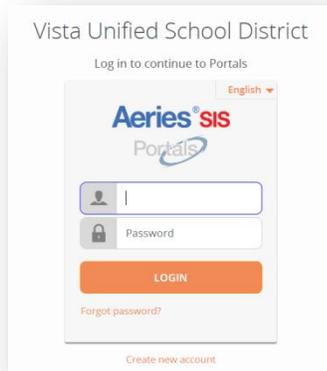
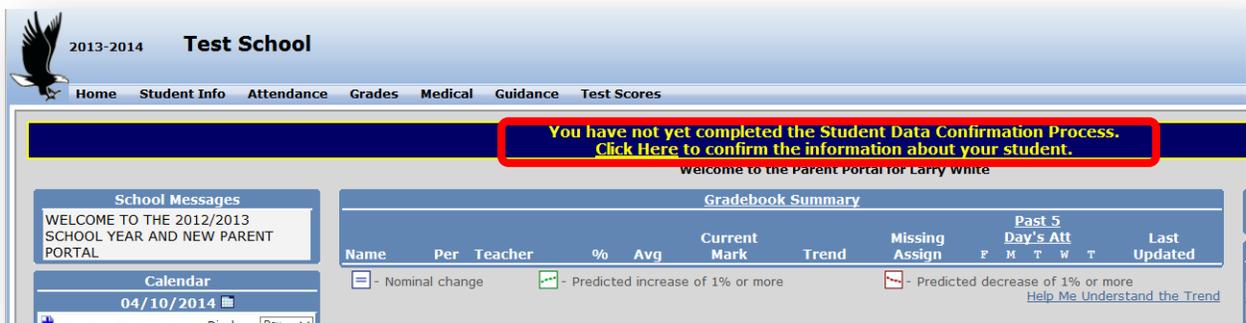


Re-Registration (Data Confirmation) Steps

Log onto Parent Portal



On the students Home screen you will get this message that you need to complete the Student Data

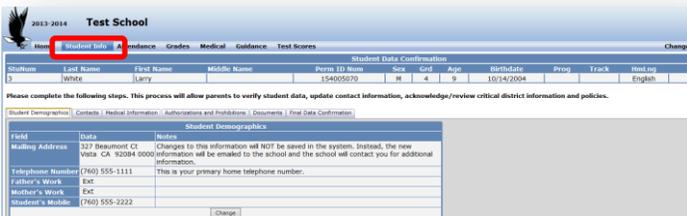


Confirmation Process. Click on the [Click Here](#) to start this process.

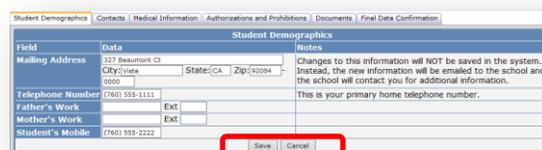
If you need to update information during the school year you can click on the Student Info Tag, and Choose Data Confirmation.



Student Demographic tab



To update this information, click on the Change button. Update information and click the Save button. **Please note: Address information will not be changed but an Email will go to the site letting them know of your new address. You will need to bring in the proper proof of address verification to have your address updated in the system.**



Contact Tab

Choose which by moving your cursor over the name, the contact you would like to update or delete. It will highlight in green. To change information, click the Change button. Update the information and then choose the Save button. To add, click the Add button. Fill in all the information needed for this contact and click Save. If there are no changes do nothing.

Please complete the following steps. This process will allow parents to verify student data, update contact information, acknowledge/review critical district information and policies.

Student Demographics **Contacts** Medical Information Authorizations and Prohibitions Documents Final Data Confirmation

Please check current contacts and update, add or delete any new contact information.

Name	Address	Relation
Linda White	1234 Arcadia Ave	Mother
Frank White		Father
Dennis Jones		
Sara Smith		Grandmother

Add a contact

Field	Data	Notes
Name	Linda White	This field is used to address mailings from the school if applicable.
Name Prefix		
Last Name	White	
First Name	Linda	
Middle Name		
Name Suffix		
Address	1234 Arcadia Ave Vista CA 92084	
Address Type		
Relationship	Mother	
Lives With Student?	Yes	
Code		
Mail Tag	Copy of All Mail	Should this contact receive an additional copy of mail? You can not flag a contact to receive additional mail unless the contact has an address that is different than the student's.
Telephone Number	(760) 555-3333	
Work Phone	Ext	
Cell Number	(760) 555-4444	
Pager		
Email Address	[REDACTED]@vistausd.org	Email Address is Locked.
Employer Name		
Employer Location		

Change Add Delete

To delete a contact that is no longer valid, choose that contact and click on the Delete button. It will ask the following question. If you really want to delete this contact record, say OK. If not Cancel.

Message from webpage

Are you REALLY sure you want to delete this Contact Record?

OK Cancel

Medical Information Tab

Please enter any new Assessment your student may have and click Save.

Please enter any additional conditions that your student may have and click Save.

If there is no change just click Save.

Please note: you need to follow up with the school nurse if you add anything to this area.

Student Demographics Contact **Medical Information** Authorizations and Prohibitions Documents Final Data Confirmation

Please note any new medical changes for your student, click SAVE. YOU MUST FOLLOW UP WITH THE SCHOOL NURSE. IF NO CHANGES JUST CLICK SAVE

Condition	Effective Date	Age	Grade	Comment	Delete
Assessment		0	0		

Save

Additional Conditions
Please Check All That Apply

Attendance Case Mgmt Hearing Impaired Health/MD Referral
 See Confidential File Ind. Health Care Plan Specialized Health Care
 Medical Diagnosis Physical Limitations Special Needs
 Emergency Care Plan Medication SST Attended
 Equipment(Wheelchair, Crutches etc) Parent Contact Teen Parent Program
 Health Concern Comment P E Limits Temporary Visual Impaired/ glasses/ contacts
 Home/Hospital P E Limits Permanent

Save

Authorizations and Prohibitions tab

Please accept all of the Authorizations and click on the Save button. If you do not want to accept any or all of these, you must go to your student's school to Deny.

Student Demographics | Contacts | Medical Information | **Authorizations and Prohibitions** | Documents | Final Data Confirmation

Please CLICK Accept for all Authorizations.

Code	Status
Rules: Student Discipline, Conduct (D) RULES OF STUDENT DISCIPLINE, CONDUCT, IN THE VISTA UNIFIED SCHOOL DISTRICT I have reviewed a copy of the Education Codes for Student Discipline in the Vista Unified School District, Student Attendance Policy in the Vista Unified School District, and Bus Safety Rules. (Grades K-5 only) I understand it is my responsibility to read and follow these rules.(These can be found on the Document tab at the top of this page)	<input checked="" type="checkbox"/> Allow/Accept
Rules: Student Attendance (E) RULES OF STUDENT ATTENDANCE IN THE VISTA UNIFIED SCHOOL DISTRICT I have reviewed a copy of the Education Codes for Student Attendance Policy in the Vista Unified School District I understand it is my responsibility to read and follow these rules.(This can be found on the Document tab at the top of this page)	<input checked="" type="checkbox"/> Allow/Accept
Rules: Bus Safety Rules (Grades K-5) (F) RULES OF STUDENT BUS AND SAFETY IN THE VISTA UNIFIED SCHOOL DISTRICT I have reviewed a copy of the Education Codes for Bus Safety Rules. (Grades K-5 only) in the Vista Unified School District. I understand it is my responsibility to read and follow these rules.(This can be found on the Document tab at the top of this page)	<input checked="" type="checkbox"/> Allow/Accept
Notification of Parent/Student Rights (G) ANNUAL NOTIFICATION OF PARENTS'/STUDENTS' RIGHTS & UNIFORM COMPLAINT PROCEDURES (State law requires signed acknowledgment of your receipt of this notification.) I hereby acknowledge I have reviewed the Annual Notification of Parents'/Students' Rights & Uniform Complaint Procedures which contains information regarding the rights, responsibilities, and protections regarding the above-named student..(These can be found on the Document tab at the top of this page)	<input checked="" type="checkbox"/> Allow/Accept
Student Accident and Health Insurance (H) STUDENT ACCIDENT AND HEALTH INSURANCE (The information about this insurance program will be available after July 1, 2013 for the 2012-13 school year.) As parent/guardian of the named student, I understand that the school does not provide medical insurance for student injuries. VUSD does make voluntary student insurance available. I have reviewed and read the information on this program..(This can be found on the Document tab at the top of this page)	<input checked="" type="checkbox"/> Allow/Accept
Student computer Use/Internet (I) STUDENT COMPUTER USE/INTERNET: I hereby give permission for my son/daughter to use the Internet. I give permission for my son/daughter to access information through the Web; receive email communication through a class account (elementary) or through an individual email account (middle/high), and engage in other educational relevant electronic communication activities.	<input checked="" type="checkbox"/> Allow/Accept

Student Use of Technology (J) STUDENT USE OF TECHNOLOGY: I have read the Vista Unified School District's Board Policy 6163.4BP and 6163.4 AR Student Use of Technology.	<input checked="" type="checkbox"/> Allow/Accept
Student Use of ABI (K) STUDENT USE OF AERIES BROWSER INTERFACE (ABI): I hereby give permission for my son/daughter to be given an Aeries Browser Interface (ABI) Student Portal District Issued account with access to their student record information.	<input checked="" type="checkbox"/> Allow/Accept
Release of Liability for student use of Internet (L) STUDENT COMPUTER USE/INTERNET RELEASE OF LIABILITY: I hereby release the District, its personnel, and any institutions with which it is affiliated, from any and all claims and damages of any nature arising from my child's use of, or inability to use the District Internet system, including, but not limited to, claims that may arise from the unauthorized use of the system to purchase products or services or exposure to potentially harmful or inappropriate material or people. I understand that I may be held liable for damages caused by my son's/daughter's misuses of the system.	<input checked="" type="checkbox"/> Allow/Accept
Student Computer/Internet restrictions (M) STUDENT COMPUTER USE/INTERNET RESTRICTIONS: I will instruct my son/daughter regarding any restrictions against material that are in addition to the restrictions set forth in the District Procedure. I will emphasize to my son/daughter the importance of following the rules for personal safety and responsibility.	<input checked="" type="checkbox"/> Allow/Accept
Student Computer Internet agreement (N) STUDENT COMPUTER USE/INTERNET STUDENT AGREEMENT: My student agrees to follow the rules contained in this procedure. They understand that if they violate the rules, their account may be terminated and they may face other disciplinary measures.	<input checked="" type="checkbox"/> Allow/Accept
Directory Opt Out (O) I understand I must contact your site if you wish to file for any of the following OPT-OUT OPTIONS: RELEASE OF INFORMATION - DIRECTORY INFORMATION; RELEASE OF INFORMATION - PRIVATE SCHOOLS AND COLLEGES; RELEASE OF INFORMATION FOR MILITARY RECRUITMENT; USE OF PHOTOS/VIDEOS, NEWSPAPER and TV	<input checked="" type="checkbox"/> Allow/Accept

Documents Tab

Please review all attached documents by clicking on each document title. Check the ALL boxes to the right to show you have read that document.

Student Demographics | Contacts | Medical Information | Authorizations and Prohibitions | **Documents** | Final Data Confirmation

Please review all attached documents. For those documents that have a check box, you must check that you have read that document.

Documents	
Administrative Regulation No 6020 Parent Involvement English and Spanish	<input type="checkbox"/>
Administrative Board Policy 6163.4 Student of Technology	<input type="checkbox"/>
ANNUAL NOTIFICATION OF PARENTS AND STUDENTS' RIGHTS English and Spanish	<input type="checkbox"/>
Annual Notification of Uniform Compliant Procedures English and Spanish	<input type="checkbox"/>
Board Policy 6020 Parent Involvement English and Spanish	<input type="checkbox"/>
Board Policy 6163.4 Student use of Technology English and Spanish	<input type="checkbox"/>
Bus Rules English and Spanish	<input type="checkbox"/>
Pesticide Annual Notification Letter 2014-2015 English Spanish	<input type="checkbox"/>
List of Pesticides	<input type="checkbox"/>
Military Service	<input type="checkbox"/>
Please print if parent is Active Duty	<input type="checkbox"/>
Student Accident Insurance English	<input type="checkbox"/>
Student Accident Insurance Letter English	<input type="checkbox"/>
Student Accident Insurance Spanish	<input type="checkbox"/>
Student Accident Insurance Letter Spanish	<input type="checkbox"/>
Student Attendance Policy English and Spanish	<input type="checkbox"/>
Student Discipline Policy English and Spanish	<input type="checkbox"/>
Wellness Letter English and Spanish	<input type="checkbox"/>
Registration Race Code Brief	<input type="checkbox"/>

Final Data Confirmation

Once you have completed each tab, confirm that you have completed by placing a check by each title and save. Please print, sign and date New Emergency Card. These will need to be turned into your student's school.

Student Demographics | Contacts | Medical Information | Authorizations and Prohibitions | Documents | **Final Data Confirmation**

Thank you for confirming the student data in the system.
Please print the New Emergency Card, sign and turn into your students school.

PLEASE CONFIRM THAT THE INFORMATION ON THE PREVIOUS TABS IS CORRECT

Student Demographic	<input checked="" type="checkbox"/>
Contact	<input checked="" type="checkbox"/>
Medical Information	<input checked="" type="checkbox"/>
Authorizations and Prohibition	<input checked="" type="checkbox"/>

Student Emergency Card

White, Larry Test School
 2013-2014 Student Emergency Card 4/11/2014

Student Information Page 1

Perm ID	Last Name	First Name	Middle Name	Sex	Grade	Birthdate
154005070	White	Larry		M	4	10/14/2004
Resid Address	Vista, CA 92084-0000		Student's Mobile (760) 555-2222			
Mailing Address	Vista, CA 92084-0000		Student's Email			
Birth Place	San Diego, California - United States Of America		Teacher Unassigned			

Parent/Guardian Information

Linda White	Primary Phone (760) 555-1111
Language: English	Father's work Mother's work

Contact Information

Linda White (lives with)	Mobile (760) 555-4444
Mother	Phone (760) 555-3333
[redacted]@vistausd.org	
Frank White (lives with)	Mobile (760) 555-6666
Father	Phone (760) 555-5555
Dennis Jones	Mobile Phone (760) 555-9999 Employer Vista Comm Clinic
Sara Smith	Mobile
Grandmother	Phone (760) 555-7777

Siblings Information

Medical Information

Status	Description	Grade	Age	Date	Start Date	End Date
Assessment		0	0	10/24/2013		

Authorizations

Authorization Type	Authorization Code	Date	Status Dt	Status
1 Prog Participation Authorization or	D Rules: Student Discipline, Conduct	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	E Rules: Student Attendance	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	F Rules: Bus Safety Rules (Grades K-5)	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	G Notification of Parent/Student Rights	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	H Student Accident and Health Insurance	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	I Student computer Use/Internet	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	J Student Use of Technology	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	K Student Use of ABI	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	L Release of Liability for student use of	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	M Student Computer/Internet restrictions	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	N Student Computer Internet agreement	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	O Directory Opt Out	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	D Rules: Student Discipline, Conduct	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	E Rules: Student Attendance	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	F Rules: Bus Safety Rules (Grades K-5)	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	G Notification of Parent/Student Rights	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	H Student Accident and Health Insurance	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	I Student computer Use/Internet	04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	J Student Use of Technology	04/10/2014	04/10/2014	Granted

Student Information Page 2

Perm ID	Last Name	First Name	Middle Name	Sex	Grade	Birthdate
154005070	White	Larry		M	4	10/14/2004
1 Prog Participation Authorization or	K	Student Use of ABI		04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	L	Release of Liability for student use of		04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	M	Student Computer/Internet restrictions		04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	N	Student Computer Internet agreement		04/10/2014	04/10/2014	Granted
1 Prog Participation Authorization or	O	Directory Opt Out		04/10/2014	04/10/2014	Granted

Signatures

Parent/Guardian Signature: _____ Date: _____