## NEW STUDENT ONLINE ENROLLMENT

## New Student Online Enrollment (NSOE) allows you the convenience of initiating the enrollment process of your student from any computer, at any time.

## **STEP 1: ACCOUNT REQUEST – NEW FAMILIES ONLY**

 Click the "Enroll my Student-I don't have a Skyward Family Access Account "button that can be found on our website under 'Enrollment.' This link will take you to the New Student Online Enrollment: Account Request screen (as seen below): ONLY parents/guardians NEW TO THE DISTRICT fill out this account request page. Enter information in the above screen and then at the bottom, select "Click here to submit Account Request."

New Student Enrol	Ilment: Account Request	
This form is the first step t	o enrolling your new student online. Complete it to request an account that you will use to log in to a secure Online Enrollment system.	
Complete required fields to req	uest an account to enroll your student(s).	
For any family that DOES NOT I Please follow the instructions below	ave a rålid europike attending AVY SCHOOL, wilde the Pullman School District: v and complete dvis decisionic form in regularat at recollment account.	
If you DO have an entral ad     If you DO NOT have an entral ad     note of at	pers, please enter is where prompted – as email with the sent in your with a improvery promoved. all address or Styrmet decedy receptizes your read address, please check? I don't have an email? and enter your decimed logic annue. A temporary partmod will be displayed immediately in a pos-to-this will be your only metification of your proproved so please makes a	
For ALL families with children co	urrently attending ANY SCHOOL within the Pullman School District;	
DO NOT fill out the electro     ALL families with children     If you have never signed in     If you are unable to obtain a     For K-5 students, students are initia	as reports minumbers, you MEST sectors and/here though you to house 1 much some some and the sector of the sector	
Enter the name of the legal parently	purclism of the student you want to enroll	
* Guardian Legal First Name:		
* Guardian Legal Last Name:		
Guardian Legal Middle Name:		
Guardian Legal Name Prefix:	Surathan Legit Name Suffic.	
Guardian contact information		
* Guardian Email Address:	Click here to submit your a	account request.
* Re-type Email Adorese:		Ĩ
* Guardian Primary Phone Number:		
Complete the security dialog		
	Tim hot a robot	
Asterisk (*) denotes a required field	Account Neuran	

 This request generates a temporary account only linked to Skyward Enrollment Access – not to be confused with Family Access. The Family Access account information is generated and emailed upon completion of the enrollment application. The account creation email for Skyward Enrollment Access will contain a link, Login ID, and Password to access the New Student Online Enrollment Portal.

To	*	-
Cc		
Bcc		
From		
Origina	al Sender	
Subject	t .	
R Co	mplete Student Enrollment	e
Body		
De	er ()	
Th	ank you for the request to enroll your student. You must now log into the system to complete the enrollment.	
Pie	tase note - you must complete this last step to complete the enrolment.	
	WARV-BLICKER WOK 2010 MILLI DATAF BLICKERK 21111 MILLI	_
Yo	ur login is	
Yo	ur bassword is	

3. Follow the link in the email and enter the login and password to gain access to the New Student Online Enrollment: Application Form or enter your desired login and temporary password if you did not provide an email address. The login area needs to be 'NEW STUDENT ENROLLMENT ACCESS.'

SI	Ý W A R D°	
CURLEW SC	HOOL DISTRICT No. 5	50
Login ID:		
Password:		
	Sign In	
	Forgot your Login/Password?	05.22.06.00.0

## **STEP 2: COMPLETING THE ONLINE ENROLLMENT APPLICATION**

terisk (*) denotes a required	field Please No	te: Only one step may be edited at a tim
Step 1: Student Informa	tion <u>Edit</u>	View Only
Step 2: Family/Guardian	Information	Edit View Only
Step 3: Emergency Con	act Information	Edit View Only
Step 4: Requested Docu	ments Edit	View Only

1. Fill in the **STUDENT INFORMATION**. Fields denoted with an \* require input or the application will not submit.

Step 1: Student Information	Edit View O	nly Save Save and Collar	ose Step	
*Last Name:		* First Name:	Middle Name:	
Name Suffix:	V Name Prefix:	V Nickname:	* Gender: 🗸 🗸	
* Date of Birth:	Age: 0	Birth City:	Birth State:	53
* Birth Country:		Birth County:		
Home Email:				
~	Does student live within th	s school district?		
*Federal/State Ethnicity: Nor (select all that apply)	e Selected (Select Feder	al/State Ethnicity)		
* State Race: Nor	ne Selected (Select State I	Race)		
(select all that apply)	50 50	* Native Language:	~	
*Language Spoken Most				
*Language Spoken Most Language Spoken at Home:		×		

2. Fill in the **FAMILY/GUARDIAN INFORMATION**. Fields denoted with an \* require input or application will not submit.

Enter Information fo	r the Pr	imary Guar	dian and the	Family this	Student lives with			
Enter Information f	or the F	amily this	student lives	with				
* Primary Phone:	(509)	123-4567	Should the	District keep	this number confidentia	1?		
Family Home Language:			$\sim$					
	Print	Hard Copy R	eport Cards					
	House	#: [	Direction:	Street N	ame:	Ap	artment:	
* Home Address:	P.O. Bo	x;	Address 2:		City:	State		Zip Code:
	Should the District keep this address confidential?							
Mailing Address:	House	#: [	Direction:	Street N	ame:	Ap	artment:	
(if different than home address)	P.O. Bo	x:	Address 2:		City:	State		Zip Code:
Enter Information f	or the F	Primary Gua	ardian of the I	Family this	Student lives with COURTNEY	Name Suffix:	~	
Name Prefix:		~						
Relationship to Child:		~						
	Does thi	is guardian ha	ve custody of the	e child?	s this guardian allowed	to pick up the student fro	m schoo	1?
0.00			Jork Dhanas		Contact Email A	ddraoor		

- 3. Fill in the MEDICAL/DENTAL INFORMATION (Optional).
- 4. Fill in the **EMERGENCY CONTACT INFORMATION.** You can enter up to a maximum of six (6) emergency contacts.

Enter the Information	n for Emergenc	y Contact #1	Remove this Emergency C	ontact	
*Last Name:	✓ Name Pref	× 🗸 🗸	* First Name:	Middle Name:	
Contact Email Address:		Work Phone:	* Primary Phone:	Should the District ke	ep this number confidential?
Relationship to Child:	)	~			
(	Do	you have othe	er Emergency Contac	ts to add for this student?	Complete Step 2 Only)

- 5. REQUESTED DOCUMENTS: <u>VERIFICATION OF STUDENT AGE & MEDICALLY VERIFIED</u> <u>IMMUNIZATION RECORDS</u>- It is <u>optional</u> to upload documentation of the student's age (e.g., a religious, hospital, or physician's certificate showing date of birth; an entry in a family bible; an adoption record; an affidavit from a parent; a birth certificate; previously verified school records; or any other documents permitted by law) and the student's medically verified immunization records.
  - a. YES, I WANT TO UPLOAD MY STUDENT'S AGE VERIFICATION:



i. Select 'Edit'

ii. Select the "Browse" button to locate a file on your computer and then you can complete Step 4.

Step 4: Requested Documents Edt View Only Swe and Collapse Step
Instructions for completing the Requested Documents
(OPTIONAL) DOCUMENT UPLOAD
VERIFICATION OF AGE: Use the Browse button to locate a file and then upload documentation of your student's age (e.g., a religious, hospital, or physician's certificate showing date of birth; an entry in a family bible; an adoption record; an affidavit from a parent; a birth certificate, previously verified school records; or any other documents permitted by law). You may also mail in or drop off verification of your student's age at your student's age at your student's age at your student's assigned school.
MEDICALLY VERIFIED IMMUNIZATION RECORDS: Use the Browse button to locate a file and then upload a copy of your student's medically verified immunization records. You may also mail in or drop off a physical copy of your student's immunization records at your student's assigned school.
All Washington State Public Schools will be required to meet student immunization guidelines from the Washington State Department of Health. Families will be required to provide a medically verified immunization record for their student.
Medically verified is defined as:
A Certificate of Immunization Status (CIS) printed from the Immunization Information System (IIS) or from "MyIR" - databases that medical providers often use
<ul> <li>A physical copy of the L1s torm wint a neutracter provider signature</li> <li>A physical copy of the L1s torm wint a neutracter provider signature</li> <li>A physical copy of the L1s torm wint a neutraction records from a healthcare provider verified and signed by a Pullman Public Schools nurse</li> </ul>
Please reach out to your child's medical provider to request a copy of the child's immunization records, and then submit the records to your student's assigned school by uploading a copy of the records to this online application or by mailing in or dropping off a physical copy to your student's assigned school complete your encollment application.
Immunization records are <u>mandatory</u> ; and students will be ineligible to attend school if appropriate records are not provided to the school.
Note: Families Experiencing Homelessness: Students experiencing homelessness are not subject to provide required documents. Fisit our MARMon Hom Program subject for more information.
Birth Centificate. Choose File No file chosen
Complete Star & and inside To Star & Additional District Format

b. NO, I DO NOT WANT TO UPLOAD MY STUDENT'S AGE VERIFICATION AND/OR MEDICALLY VERIFIED IMMUNIZATION RECORDS: Please email, mail, or drop off a copy of your student's records to Curlew School.

•	Select 'Edit'		
	Step 4: Requested Documents	Edit	View Only

ii. Select 'Complete Step 4 and move to Step 5: Additional District Forms' or 'Complete Step 4 Only'

Step 4: Requested Documents East View Colly Seve Ind Collapse Step
Instructions for completing the Requested Documents
(OPTIONAL) DOCUMENT UPLOAD
VERIFICATION OF AGE: Use the Browse button to locate a file and then upload documentation of your student's age (e.g., a religious, hospital, or physician's certificate showing date of birth; an entry in a family bible; an adoption record; an affidavit from a parent; a birth certificate; previously verified school records; or any other documents permitted by law). You may also mail in or drop off verification of your student's age at your student's assigned school.
MEDICALLY VERIFIED INJUNIZATION RECORDS: Use the Browse button to locate a file and then upload a copy of your student's medically verified immunization records. You may also mail in or drop off a physical copy of your student's immunization records at your student's assigned school.
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A Certificate of Immunization Status (CIS) printed from the Immunization Information System (IIS) or from "MyIR" – databases that medical providers often use     Aphysical copy of the CIS with a companying medical immunization records from a healthcare provider verified and signed by a Pullman Public Schools nurse
Please reach out to your child's medical provider to request a copy of the child's immunization records, and then submit the records to your student's assigned school by uploading a copy of the records to this online application or by mailing in or dropping off a physical copy to your student's assigned school complete your enrollment application.
Immunization records are mandatory, and students will be inclugible to attend school if appropriate records are not provided to the school.
Note: Families Experiencing Homelessness: Students experiencing homelessness are not subject to provide required documents. Visit our McDang-Inno Program velogate for more information.
Birth Carditata: Choose File ) No file chosen Immunization Records: Choose File ) No file chosen
Complete Step 4 and move to Step 5: Additional District Forms Complete Step 4 Only

6. **ADDITIONAL DISTRICT FORMS** also need to be completed as part of the enrollment process.

Once all of the required Additional District Forms have been completed, they will receive a check mark and a note that the form has been completed. Be sure to select 'Complete Step 6' once you have completed all of the required forms.

7. Continue until all application steps have been completed. Any of the steps may be reviewed and edited if needed. Select 'Submit Application to District' once all forms are completed.

Submit Application to the District

\* All steps must be Completed before an Application can be Submitted \*