

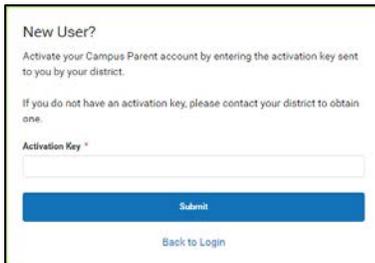


Portal del campus: Proceso de configuración por 1ª vez

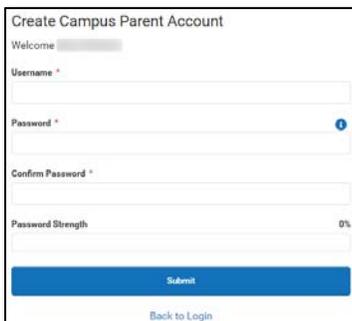
Los siguientes son los pasos que los padres deberán completar para activar su cuenta del Portal del campus y para completar el proceso de Revisión de información de salud y emergencias.

Acceso por primera vez: Cree una cuenta:

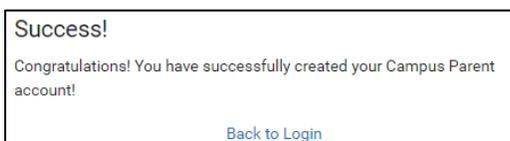
1. En un navegador de la web (no en la app), vaya a la siguiente URL: <https://tinyurl.com/196ParentKey>
2. Ingrese el código de activación provisto en el reverso de esta página, exactamente tal como aparece (no es necesario escribir los guiones).



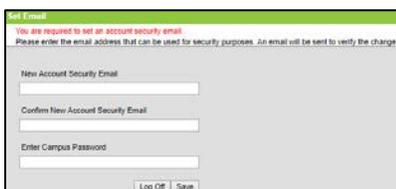
3. Elija un nombre de usuario y una contraseña (el medidor de la contraseña debe llegar al 100%).



4. Haga clic en el enlace **Back to Login** (Haga clic aquí), utilizando las credenciales creadas arriba.

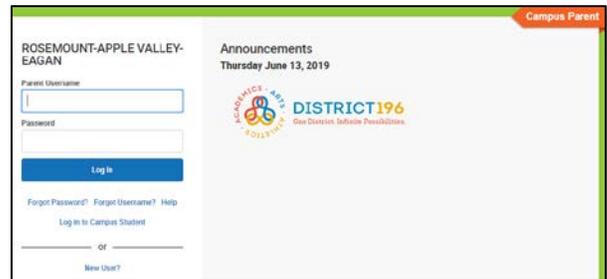


5. Alinee una dirección de correo electrónico a esta cuenta para una recuperación de contraseña, ingrese su nueva contraseña y luego haga click en **Save** (Guardar).



Siguientes accesos: Inicie sesión

1. En un navegador de internet, vaya a la siguiente URL: <http://www.district196.org/parents> y haga clic en el botón **Campus Parent Login** (Inicio de sesión del Portal del campus).
2. Ingrese su nombre de usuario y su contraseña y haga clic en **Log In** (Ingresar).



3. La primera vez que ingrese se lo dirigirá para que complete el proceso anual de Revisión de información de emergencias / salud. Consulte la página adjunta para ver las instrucciones.

Aplicaciones móviles: Descarga y configuración

1. Una vez que haya creado su cuenta y completado el proceso de Revisión de emergencias/salud, puede descargar la aplicación **Campus Parent** para iPhone o Android, desde iTunes Store o Google Play Store, por medio de la búsqueda de "Campus Parent" en la tienda correspondiente.
2. La primera vez que utilice la aplicación, se le pedirá que ingrese el nombre del distrito y el estado. Escriba **Rosemount** para el distrito y seleccione **Minnesota** para el estado, luego presione **Search** (Buscar).
3. Seleccione **Rosemount-Apple Valley-Eagan** de la lista resultante, luego inicie sesión utilizando las credenciales creadas anteriormente.



Completar el Proceso de revisión de emergencias / salud

Una vez que se haya creado la cuenta del Portal del campus, la misma irá directamente al Proceso de revisión de emergencias y salud. Las siguientes son, paso por paso, las capturas de pantalla del dicho proceso.

Infinite Campus
Kristi O'Brien
Annual Student Information Review

ALERT: You will not be able to access the Parent Portal until this Emergency/Health Information Process is complete.

To the Parent or Guardian: Your student's welfare is our first consideration. In case of serious injury or illness of a student in school, the following steps will be taken immediately:

- The school nurse will be called
- Emergency line 911 will be called, if deemed necessary
- You or the person designated as the emergency contact will be called

If none of the persons listed can be reached, school personnel will implement emergency procedures to protect the health and safety of your child. It is your responsibility to make arrangements for proper care in case your child is injured or becomes too ill to stay in school when you are away from home. There have been instances when we could not reach parents or guardians of injured or ill children because the information in our system was not current. To ensure your information is current, please carefully review/update the requested information for your family and enrolled child(ren) listed below by clicking the "Begin Review" button. Throughout the process, you will be presented with a variety of information to enter. Many steps will have required fields marked with an asterisk (*). You must enter information into these fields before you will be allowed to continue. Your completion acknowledges that this information will be maintained both at school and on the bus (if applicable.) If there are any significant changes to your child's health, please call to keep the school nurse informed. Thank you for taking the time to complete this annual process so we can better serve you and your child(ren)!

Student Name	Grade	Included in new App?	Reason if not included	Online Registration Submitted
	11	Yes	Included	No

Registration Year: 18-19 *

Begin Review

Haga clic en Begin Review (Comenzar revisión).

Infinite Campus Online Registration

Welcome [redacted]! Please type in your first and last name in the box below.

By typing your name into the box below you attest that you are the person authenticated into 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.

Submit

Escriba su nombre y su apellido y luego haga clic en Submit (Enviar).

Welcome to the Infinite Campus Online Registration. Before you begin, please gather the following:

- Household information -- address and phone numbers
- Parent information -- work and cell phone numbers, email addresses
- Student information -- demographic and health/medication information
- Emergency Contact - addresses and phone numbers.

Note: Required fields are marked with a red asterisk, and the district will receive the data exactly as it is entered. Please be careful of spelling, capitalization and punctuation. Dates should be entered as MM/DD/YYYY and phone numbers as xxx-xxx-xxxx.

If you need assistance please call your child's school.

Begin

Haga clic en Begin.



▼ Student(s) Primary Household
Parent/Guardian
Emergency Contact
Non-Enrolled Household Member
Student
Completed

Home phone

This phone number will be used for Emergency calls from the District.

Home Phone

Ingrese el número de teléfono de su hogar. Este número se utilizará para llamadas de emergencia del edificio/de todo el distrito, luego, haga clic en Next. (Siguiente).

▼ Student(s) Primary Household
Parent/Guardian
Emergency Contact
Non-Enrolled Household Member
Student
Completed

Home phone

Home Address

Your address as listed in the portal

The home address listed is no longer current

Verifique que la dirección de su hogar sea la correcta. Si así no fuera, haga clic en el casillero indicando que no está actualizada. Ingrese su dirección actual y luego haga clic en Next.

▼ Student(s) Primary Household
Parent/Guardian
Emergency Contact
Non-Enrolled Household Member
Student
Completed

Home phone

Home Address

Mailing Address

Please use the address editor below to enter your mailing address if different than home address. You will see the formatted postal address below in the viewer. Once your address appears as it should on U.S. Postal Mail, please click "Save/Continue".

Mail address is the same as home address

Verifique que su dirección de correo postal sea la misma que la de su hogar. Si así no fuera, quite la marca al casillero y agregue su dirección de correo, luego haga clic en Save/Continue.



✓ Student(s) Primary Household
▼ Parent/Guardian
Emergency Contact
Non-Enrolled Household Member
Student
Completed

Parent/Guardian

First Name	Last Name	Gender	Completed	Record Type	
		M		Existing	Edit/Review
		F		Existing	Edit/Review

Please list all primary Parent/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](#)

Haga clic en **Edit/Review** (Modificar/Revisar) para cada padre/tutor resaltado en amarillo y complete los siguientes cuatro pasos para cada uno de ellos.

✓ Student(s) Primary Household
▼ Parent/Guardian
Emergency Contact
Non-Enrolled Household Member
Student
Completed

Parent/Guardian Name: [Redacted]

Demographics

Below is the information we have on record for you. For changes, please contact census@district196.org

First Name: [Redacted] *
 Middle Name: [Redacted]
 Last Name: [Redacted] *
 Suffix: [Redacted]
 Birth Date: [Redacted] [Q]
 Gender: Male *
 Primary Language: [Redacted]

Please check this box if this person lives at the address listed below.

[Redacted Address]

[Next >](#)

Verifique la información demográfica de los padres. Si es necesario hacer cambios, haga clic en el enlace del correo electrónico, para enviar un mensaje, indicando los cambios necesarios. Haga clic en **Next**.

✓ Student(s) Primary Household
▼ Parent/Guardian
Emergency Contact
Non-Enrolled Household Member
Student
Completed

Parent/Guardian Name: [Redacted]

Demographics

Contact Information

Update / Review the contact information for this parent/guardian. Check the Contact Preferences box for message types you want to receive via Email.

Cell Phone [Redacted]
 Work Phone [Redacted]
 Other Phone [Redacted]
 Email [Redacted]
 or
 Has no e-mail
 Secondary Email [Redacted]

Preferred Language
 What is your preferred language for school communications pertaining to your child's education?
 En que idioma prefiere recibir información escolar acerca de la educación de su estudiante?
 Waa maxay luqada aad rabtid in iskuulku kugula soo xiriiro ee ku saabsan waxbarashada ilmahaaga?

Description of Contact Preferences
Emergency - Marking this checkbox will use this method of contact for emergency messages
General - Marking this checkbox will use this method of contact for general school messages, such as those sent by
Teacher - Marking this checkbox will use this method of contact for teacher-sent messages, including messages reg

Verifique/agregue números de teléfono y seleccione las opciones de arriba, para los tipos de notificaciones que desee recibir vía correo electrónico. Haga clic en Next.

✓ Student(s) Primary Household
▼ Parent/Guardian
Emergency Contact
Non-Enrolled Household Member
Student
Completed

Parent/Guardian Name: [Redacted]

Demographics

Contact Information

Migrant Worker

Has this person, within the past 36 months, relocated with the intent to obtain seasonal or temporary employment in agriculture, fishing, and dairy of food processing work?

Yes, this individual is a migrant worker
 No, this individual is not a migrant worker

Elija la opción apropiada y luego, haga clic en Next.

✓ Student(s) Primary Household
▼ Parent/Guardian
Emergency Contact
Non-Enrolled Household Member
Student
Completed

Parent/Guardian Name: [Redacted]

Demographics

Contact Information

Migrant Worker

Military Connections

Federal Impact Aid (FIA) Section 8003 Grant Information.
Parent/Guardian in Military

Yes, this individual is a member of the military
 No, this individual is not a member of the military

Elija la opción apropiada y luego, haga clic en Save/Continue.



✓ Student(s) Primary Household >
 ▼ Parent/Guardian >
 ✓ Emergency Contact >
 ✓ Non-Enrolled Household Member

Parent/Guardian

First Name	Last Name	Gender	Completed	Record Type	
		M	✓	Existing	Edit/Review
		F	✓	Existing	Edit/Review

Please list all primary Parent/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](#)

Cuando todos los padres/tutores se muestren como completados, haga clic en **Save/Continue**.

✓ Student(s) Primary Household >
 ✓ Parent/Guardian >
 ▼ Emergency Contact >
 Non-Enrolled Household Member >
 Student >
 Completed

Emergency Contact

First Name	Last Name	Gender	Completed	Record Type	Remove
<p><u>in AN EMERGENCY, if parent/guardian cannot be contacted, please call one of the following Emergency Contacts listed, required before a student is released to emergency contacts.</u></p> <p>Yellow - Indicates that person is missing required information. Select the highlighted row to continue.</p> <p>✓ - Indicates that person is completed.</p>					

[Add New Emergency Contact](#) |
 [Back](#) |
 [Save/Continue](#)

Para agregar un contacto para emergencias, haga clic en **Add New Emergency Contact** (Agregar nuevo contacto para emergencias) o haga clic en **Save/Continue** si no desea agregar uno, y si desea saltar los siguientes cuatro pasos.

Emergency Contact Information

Please enter Emergency Contacts. Do not enter Parent/Guardian(s) here if already entered in Parent/Guardian section.

[Ok](#)

✓ Student(s) Primary Household >
 ✓ Parent/Guardian >
 ▼ Emergency Contact >
 Non-Enrolled Household Member >
 Student >
 Completed

Contact Name:

▼ Demographics

Please complete the following information for each emergency contact for your students.

First Name *
 Middle Name *
 Last Name *
 Suffix *
 Birth Date [Q]
 Gender *

[Next >](#)

Ingrese la información solicitada y haga clic en **Next**.



✓ Student(s) Primary Household
✓ Parent/Guardian
▼ Emergency Contact
⊘ Non-Enrolled Household Member
⊘ Student
⊘ Completed

Contact Name: [Redacted]

Demographics

Contact Information

Enter the contact information for this emergency contact.

At least one Phone Number is required.*

Home Phone () - -

Cell Phone () - -

Work Phone () - - x

Email

Ingrese, por lo menos, un número de teléfono y luego haga clic en **Next**.

✓ Student(s) Primary Household
✓ Parent/Guardian
▼ Emergency Contact
⊘ Non-Enrolled Household Member
⊘ Student
⊘ Completed

Contact Name: [Redacted]

Demographics

Verification

Please enter the address for this emergency contact. This information will only be used to verify the contact doesn't already appear in our system.

Please check this box if this person lives at the address listed below.

or

Address Line 1

Address Line 2

Example
 Address Line 1 - 123 S Main St Apt 4
 Address Line 2 - Schenectady, NY 12345

Ingrese la dirección de este contacto para Emergencias o marque el casillero, si él/ella vive en la misma dirección antes indicada, luego haga clic en **Save/Continue**.

✓ Student(s) Primary Household
✓ Parent/Guardian
▼ Emergency Contact
⊘ Non-Enrolled Household Member
⊘ Student
⊘ Completed

Emergency Contact

First Name	Last Name	Gender	Completed	Record Type	Remove Existing Contact
[Redacted]	[Redacted]	M	✓	New	<input type="button" value="Edit/Review"/>

In AN EMERGENCY, if parent/guardian cannot be contacted, please call one of the following Emergency Contacts listed. Proper identification will be required before a student is released to emergency contacts.

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

✓ - Indicates that person is completed.

Una vez que se hayan ingresado todos los contactos de Emergencias, haga clic en **Save/Continue**.

✓ Student(s) Primary Household
✓ Parent/Guardian
✓ Emergency Contact
▼ Non-Enrolled Household Member
⊘ Student
⊘ Completed

Non-Enrolled Household Member

First Name	Last Name	Gender	Completed	Record Type	
		M		New	Edit/Review

Please use 'Add New Household Member' link below to add a new member living in the Primary Household.
DO NOT add currently enrolled students as they are listed in the Student tab.

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

[Add New Household Member \(DO NOT add currently enrolled students\)](#)
[Back](#) [Save/Continue](#)

Haga clic en Edit/Review para cada persona resaltada en amarillo y complete los siguientes cuatro pasos para cada una de ellas.

✓ Student(s) Primary Household
✓ Parent/Guardian
✓ Emergency Contact
▼ Non-Enrolled Household Member
⊘ Student
⊘ Completed

Name: [Redacted]

Demographics

For changes please contact census@district196.org

First Name [Redacted] *
 Middle Name [Redacted] *
 Last Name [Redacted] *
 Suffix [Redacted] *
 Birth Date [Redacted] *
 Gender Male [Redacted] *

Verifique la información demográfica. Si es necesario hacer cambios, haga clic en el enlace de correo electrónico, para enviar un mensaje indicando los cambios necesarios. Haga clic en Save/Continue.

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

✓ Student(s) Primary Household
✓ Parent/Guardian
✓ Emergency Contact
▼ Non-Enrolled Household Member
⊘ Student
⊘ Completed

Non-Enrolled Household Member

First Name	Last Name	Gender	Completed	Record Type	
		M	✓	New	Edit/Review

Please use 'Add New Household Member' link below to add a new member living in the Primary Household.
DO NOT add currently enrolled students as they are listed in the Student tab.

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

[Add New Household Member \(DO NOT add currently enrolled students\)](#)
[Back](#) [Save/Continue](#)

Una vez que haya revisado todos los enumerados, haga clic en Save/Continue.



[✓ Student\(s\) Primary Household](#)
[✓ Parent/Guardian](#)
[✓ Emergency Contact](#)
[✓ Non-Enrolled Household Member](#)
[▼ Student](#)
[Completed](#)

Student

First Name	Last Name	Gender	Completed	Record Type	
		M		Existing	Edit/Review

Please include all students that need to be enrolled.

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](#)

Haga clic en **Edit/Review** para cada hijo resaltado en amarillo y complete los siguientes 9 pasos para cada uno de ellos.

[✓ Student\(s\) Primary Household](#)
[✓ Parent/Guardian](#)
[✓ Emergency Contact](#)
[✓ Non-Enrolled Household Member](#)
[▼ Student](#)
[Completed](#)

Student Name:

Demographics

Please verify the information below. For changes, please contact census@district196.org
 You are able to update Nickname and Student Cell Phone on this form.

Legal First Name: Gender: Male Enrollment Grade: 11
 Legal Middle Name: Birth Date: Enrolled School: Logan High Sch
 Legal Last Name: *** Please select 1 option(s)**
 Suffix: Yes, this is a foreign exchange student
 Nickname: No, this is not a foreign exchange student
 Student Cell Number: () - -

[Next >](#)

Revise la información demográfica. ¡NO cambie el Grado de Inscripción! Si es necesario, envíe un correo electrónico con los cambios solicitados, utilizando el enlace del correo electrónico. Para alumnos de los grados 11 o 12, seleccione Yes (Sí) o No, para la pregunta de Estudiante extranjero de intercambio, luego haga clic en Next.

[✓ Student\(s\) Primary Household](#)
[✓ Parent/Guardian](#)
[✓ Emergency Contact](#)
[✓ Non-Enrolled Household Member](#)
[▼ Student](#)
[Completed](#)

Student Name:

Demographics

Race Ethnicity

Is Hispanic/Latino No

*Please check all that apply. If not Hispanic, at least one is required.

American Indian or Alaska Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White

Primary Race: White, not Hispanic

[Previous](#) [Next >](#)

Seleccione las opciones apropiadas y luego haga clic en **Next**.

✓ Student(s) Primary Household
✓ Parent/Guardian
✓ Emergency Contact
✓ Non-Enrolled Household Member
▼ Student
Completed

Student Name: [REDACTED]

Demographics

Race Ethnicity

Relationships - Parent/Guardians

Please review/update Relationship and Contact Sequence.*

Name	Relationship*	Guardian	Mailing	Portal	Messenger	Contact Sequence*	or	No Relationship
[REDACTED]	Mother	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1		<input type="checkbox"/>
[REDACTED]	Father	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	2		<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 flag this person as a portal account, and this person will be able to view student information within the portal for this student.

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

Contact Sequence - Adding a sequence number on contacts will prompt district staff to contact these persons in the order that you specify. Parent/Guardians should start with a sequence of 1.

No Relationship - Marking this checkbox will indicate that this person does not have a relationship to the student. By checking this checkbox you are indicating that this person no longer has a relationship to the student. The relationship will be ended if one exists.

Seleccione las opciones apropiadas para cada padre/tutor enumerado, utilizando las descripciones provistas. Seleccione la secuencia en la que usted desea que se llame a cada contacto, luego haga clic en Next.

Previous Next

✓ Student(s) Primary Household
✓ Parent/Guardian
✓ Emergency Contact
✓ Non-Enrolled Household Member
▼ Student
Completed

Student Name: [REDACTED]

Demographics

Race Ethnicity

Relationships - Parent/Guardians

Relationships - Emergency Contacts

Name	Relationship*	Contact Sequence*	or	No Relationship
[REDACTED]	[REDACTED]	[REDACTED]		<input type="checkbox"/>

[Description of Contact Preferences](#)

Contact Sequence - Adding a sequence number on contacts will prompt district staff to contact these persons in the order that you specify. Parent/Guardians should start with a sequence of 1.

No Relationship - Marking this checkbox will indicate that this person does not have a relationship to the student. The relationship will be ended if one exists.

Seleccione la relación correspondiente para cada contacto enumerado para emergencias. Seleccione la secuencia en la que usted desea que se llame a cada contacto. Esta secuencia incluye a los padres/tutores de la pantalla anterior. Haga clic en Next.

Previous Next



Student(s) Primary Household
 Parent/Guardian
 Emergency Contact
 Non-Enrolled Household Member
 Student
 Completed

Student Name: [Redacted]

Demographics
 Race Ethnicity
 Relationships - Parent/Guardians
 Relationships - Emergency Contacts
 Relationships - Other Household

Name	Relationship*	or	No Relationship
[Redacted]	Household		<input type="checkbox"/>

Description of Contact Preferences
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. The relationship will be ended if one exists.

Seleccione la relación correspondiente para cada uno de los otros miembros del hogar enumerados (si lo hubiera) y luego haga clic en **Next**.

Student(s) Primary Household
 Parent/Guardian
 Emergency Contact
 Non-Enrolled Household Member
 Student
 Completed

Student Name: [Redacted]

Demographics
 Race Ethnicity
 Relationships - Parent/Guardians
 Relationships - Emergency Contacts
 Relationships - Other Household
 Health Services - Medical or Mental Health Conditions

No medical or mental health conditions

or

Existing Condition*	Condition Status*
[Redacted]	<input type="radio"/> This condition is current <input type="radio"/> This condition is NOT current
Existing Condition*	Condition Status*
[Redacted]	<input type="radio"/> This condition is current <input type="radio"/> This condition is NOT current
Existing Condition*	Condition Status*
[Redacted]	<input type="radio"/> This condition is current <input type="radio"/> This condition is NOT current

Marque el casillero si este(a) hijo(a) no tiene afecciones médicas o de salud y, si hay alguna indicada, especifique si es o no actual. Haga clic en **Next**.

Medication*	Where Taken*	Medication Type*	Comments and Instructions	<input type="button" value="Remove Medication"/>
[Redacted]	[Redacted]	[Redacted]	[Redacted]	



Student(s) Primary Household
 Parent/Guardian
 Emergency Contact
 Non-Enrolled Household Member
 Student
 Completed

Student Name: [Redacted]

- Demographics
- Race Ethnicity
- Relationships - Parent/Guardians
- Relationships - Emergency Contacts
- Relationships - Other Household
- Health Services - Medical or Mental Health Conditions
- Health Services - Medications**

No medications

or

Add Medication

Marque el casillero si este(a) hijo(a) no toma medicamentos o haga clic en **Add Medication** (Agregar medicamento), si toma, y complete el formulario. Haga clic en **Next**.

Student(s) Primary Household
 Parent/Guardian
 Emergency Contact
 Non-Enrolled Household Member
 Student
 Completed

Student Name: [Redacted]

- Demographics
- Race Ethnicity
- Relationships - Parent/Guardians
- Relationships - Other Household
- Health Services - Medical or Mental Health Conditions
- Health Services - Medications
- Health Services - Health Information**

Please indicate if you will allow the school to administer the following to your child

Acetaminophen	<input type="checkbox"/>
Antacid	<input type="checkbox"/>
Antihistamine	<input type="checkbox"/>
Hydrocortisone	<input type="checkbox"/>
Topical Antibiotic	<input type="checkbox"/>
Ibuprofen	<input type="checkbox"/>
Self-Carry Acetaminophen Ibuprofen	<input type="checkbox"/>

Indique si le permite a la escuela administrar cada uno de los medicamentos enumerados, contestando Yes o No, por medio de la lista desplegable. Haga clic en **Next**.



[✓ Student\(s\) Primary Household](#) > [✓ Parent/Guardian](#) > [✓ Emergency Contact](#) > [✓ Non-Enrolled Household Member](#) > [▼ Student](#) > [Completed](#)

Student Name: [Redacted]

- Demographics
- Race Ethnicity
- Relationships - Parent/Guardians
- Relationships - Other Household
- Health Services - Medical or Mental Health Conditions
- Health Services - Medications
- Health Services - Health Information
- ▼ Release Agreements
 - Technology** - To review the District Internet Use policy, please click [here](#)
My child has permission to use the Internet. ▼*
 - Instructional Release Agreement** - To review the Instructional Release Agreement, please click [here](#)
My child has permission to participate in photographed, audiotaped or videotaped math and literacy projects. ▼*

Use la lista desplegable haciendo clic en la flecha para seleccionar SI o NO para el Permiso de Uso de Tecnología y el Acuerdo para Permiso de Instrucción. Haga clic en Save/Continue.

[✓ Student\(s\) Primary Household](#) > [✓ Parent/Guardian](#) > [✓ Emergency Contact](#) > [✓ Non-Enrolled Household Member](#) > [▼ Student](#) > [Completed](#)

Student

First Name	Last Name	Gender	Completed	Record Type	
[Redacted]	[Redacted]	M	✓	Existing	<input type="button" value="Edit/Review"/>

Please include all students that need to be enrolled.

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

✓ - Indicates that person is completed.

Una vez que se hayan completado la información para todos los estudiantes, haga clic en Save/Continue.

[✓ Student\(s\) Primary Household](#) > [✓ Parent/Guardian](#) > [✓ Emergency Contact](#) > [✓ Non-Enrolled Household Member](#) > [✓ Student](#) > [▼ Completed](#)

You must submit your application by clicking the following button.

PLEASE NOTE: Prior to submitting your application you may verify all of the data you have entered by going back to the area in question or click on the PDF link below. Your information is not submitted until you click the Submit button above. You will receive an email notification that your application was received after clicking Submit.

[Application Summary PDF](#)

El proceso ahora se ha completado y se puede revisar, haciendo clic en los títulos de las secciones que aparecen en la parte superior, o descargando una copia en PDF. Una vez que esté satisfecho con las respuestas, haga clic en Submit.

NOTA: Es posible que los cambios enviados requieran ser revisados por el personal del distrito, antes de que se apliquen a Infinite Campus. Agradeceremos su paciencia, mientras trabajamos con todas las solicitudes.