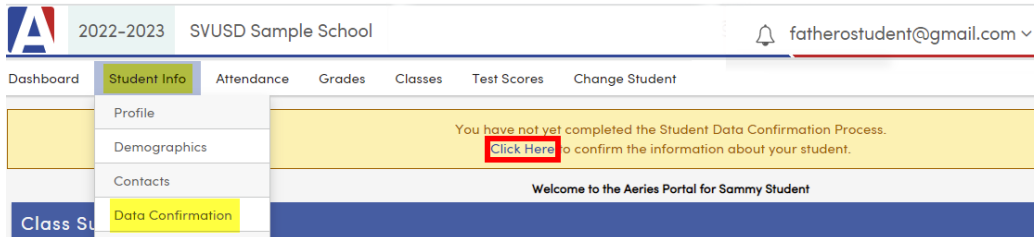


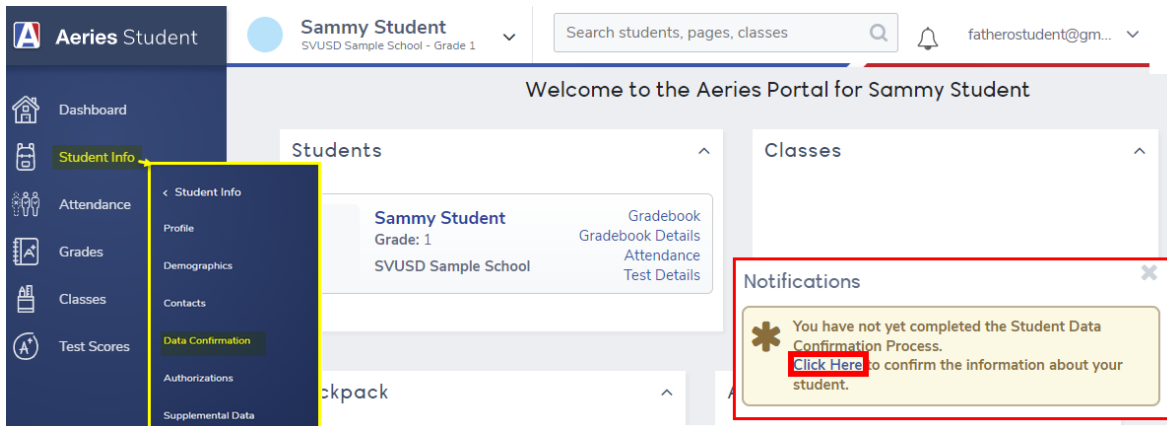
Guía de Confirmación de Datos de Aeries para Padres

Cuando un padre/madre inicia una sesión por primera vez en el Portal para Padres, verá un mensaje que le indicará que no ha completado el proceso de Confirmación de Datos para su estudiante.

Si están utilizando la antigua interfaz del Portal para Padres, aparecerá un cartel amarillo cerca de la parte superior de su página.



Si están utilizando la nueva interfaz del Portal para Padres, el mensaje aparecerá en una ventana de diálogo cerca de la parte posterior de su página.



En cualquiera de las interfaces, pueden hacer clic en el enlace **Haga Clic Aquí** (enmarcado en rojo), o pueden hacer clic en el menú **Info del Estudiante** y seleccionar **Confirmación de Datos** (resaltado en amarillo)

Hay 8 pestañas en el proceso de Confirmación de Datos, y los padres tendrán que completar cada una antes que puedan avanzar al siguiente paso. Una vez se completa un paso, el número del paso se reemplazará con una marca de verificación, y los padres se moverán automáticamente al siguiente paso.

[Paso 1 - Información Familiar](#)

[Paso 2- Ingresos](#)

[Paso 3 - Demografía del Estudiante](#)

[Paso 4 - Contactos](#)

[Paso 5 - Condiciones Médicas](#)

[Paso 6 - Documentos](#)

[Paso 7 - Autorizaciones](#)

[Paso 8 -Confirmación Final de Datos](#)

Paso 1 - Información Familiar

1. Seleccione una de las opciones
2. Haga clic en el botón Confirmar y Continuar

Please review and update your information on each of the numbered tabs 1-8 (left side menu). Select the 'Confirm and Continue' button to proceed to the next item. For changes other than those on tabs 1-8, please contact your school office.

Change of address is handled at your school site.

1 Family Information	<p>Please select whether or not at least one parent/guardian of this student is currently serving on active duty in the United States Armed Forces:</p> <div><input type="checkbox"/> Yes, at least one parent/guardian of this student is currently serving on active duty in the United States Armed Forces.</div> <div><input type="checkbox"/> No, this student does not have a parent/guardian who is active in the United States Armed Forces.</div>
2 Income	
3 Student	
4 Contacts	
5 Medical History	
6 Documents	
7 Authorizations	
8 Final Data Confirmation	

2 Confirm and Continue

Paso 2- Ingresos

1. Ingrese el número de personas en su hogar (si es más de 6, use las flechas para incrementar o disminuir el número)
2. Elija el ingreso mensual total de su hogar (las cantidades se ajustarán automáticamente dependiendo del número de personas en su hogar)
3. Haga clic en el botón Confirmar y Continuar
4. Aparecerá una ventana de diálogo pidiéndole que verifique la información que ingresó. Haga clic en OK si es correcto o Cancelar si necesita cambiarlo.

Family Information

- 2 Income
- 3 Student
- 4 Contacts
- 5 Medical History
- 6 Documents
- 7 Authorizations
- 8 Final Data Confirmation

School Funding Form

The answers to the questions below allow the district to maximize state and federal funding for the educational benefit of our students. Your answers are strictly confidential. The answers will determine if the student may qualify to receive reductions in fees for bus passes, home internet access, utilities, AP/SAT/PSAT testing, along with additional funding for their school.

1 How many people are in your household?

1 2 3 4 5 More 6

2 What is your total monthly household income?

\$4029 or less

\$4030 - \$5734

\$5735 or greater

3 **Confirm and Continue**

4 **Confirm**

Please make sure this information is correct. Once it is submitted it will not be editable.

4

Paso 3 - Demografía del Estudiante

1. Haga clic en el botón Cambiar si es necesario actualizar alguno de los datos. (Vaya al paso 2 si todos los datos están correctos)
2. Haga clic en el botón Confirmar y Continuar

Click the 'Change' button to update information. Once you have made your corrections, click the 'Save' button to post the changes.

Student Demographics		
Notes		
Parent/Guardian	Mr & Mrs. Student	This field is used to address mailings from the school if applicable.
Primary Phone	(949) 555-1212	
Student's Mobile		
Parent Highest Education Level	Grad School/post grad trng	

1 Change

2 Confirm and Continue

Paso 4 - Contactos

1. Haga clic en el botón de lápiz si alguno de los registros de contacto enumerados debe actualizarse o eliminarse.

Haga clic en el botón Agregar si es necesario ingresar nuevos contactos

2. Haga clic en el botón Confirmar y Continuar (Omita este paso si no hay cambios en la información de los contactos)

The following are guidelines for entering contacts:

- Only include email for parents/guardians
- Include an emergency contact other than Parent/Guardian. Use 'Relationship to student' drop-down and select 'Emergency Contact'
- Include an out-of-state contact if possible
- 'Email Address is Locked' indicates email is tied to a portal account and cannot be modified through Contacts. Please use the 'Change Email' menu option when logging in with that email.

2 Add

1 Father Student
Father
Lives With Ed Level: Grad School/post grad trng (5)
fatherstudent@gmail.com
(949) 555-1212
Last Updated: 6/30/2022 11:13 AM

3 Confirm and Continue

Mother Student

Paso 5 - Condiciones Médicas

1. Si su estudiante ya no tiene una condición médica en la lista, haga clic en el botón Ya no se Aplica.
2. Haga clic en cualquier condición médica adicional que tenga su estudiante y agregue detalles si es necesario.
3. Cuando se completen todos los cambios, haga clic en el botón Guardar (también hay un botón Guardar en la parte posterior de esta página)
4. Haga clic en el botón Confirmar y Continuar (Omita este paso si no hay cambios en la información médica o no hay condiciones médicas que ingresar).

- Family Information
- Income
- Student
- Contacts
- 5 Medical History**
- 6 Documents
- 7 Authorizations
- 8 Final Data Confirmation

4 Confirm and Continue

Please review the medical information for your child (if any) and add new or check the 'No Longer Applicable' button. Click the 'Save' button after you have made your changes. If your child takes medication during the school day, please print the medication form from the documents page, have it signed by the Physician, and return it with the medication to the school office.

Medical History and Current Medical Conditions

Condition	Effective Date	Age	Grade	Comment	
Asthma	10/01/2018 <input type="text"/>	6	1	Will provide inhaler to health office	<input checked="" type="checkbox"/> 1 No Longer Applies

3 Save




2 Additional Conditions Please Check All That Apply

<input type="checkbox"/> Allergic To All Nuts	<input type="checkbox"/> Catheterization- (SPHC)	<input type="checkbox"/> Other Health Condition
<input type="checkbox"/> Allergic To All Peanut Products	<input type="checkbox"/> Chemotherapy	<input type="checkbox"/> Oxygen Administration - (ECP)
<input type="checkbox"/> Allergic To Bee, Ants, Insect Or Spider Bites	<input type="checkbox"/> Diabetic - Type 1- (ECP)	<input type="checkbox"/> Seizures - Absence / Petit Mal
<input type="checkbox"/> Allergic To Dairy (Milk) Products	<input type="checkbox"/> Diabetic - Type 1 - Glucagon - (ECP)	<input type="checkbox"/> Seizures - Complex Partial
<input type="checkbox"/> Allergic To Eggs	<input type="checkbox"/> Diabetic - Type 1 - Insulin Pen - (ECP)	<input type="checkbox"/> Seizures - Diastat Protocol - (ECP)
<input type="checkbox"/> Allergic To Foods - See Health File	<input type="checkbox"/> Diabetic - Type 1 - Insulin Pump - (ECP)	<input type="checkbox"/> Seizures - Grand Mal - (ECP)
<input type="checkbox"/> Allergic To Gluten, Wheat, Caseins	<input type="checkbox"/> Diabetic - Type 2	<input type="checkbox"/> Seizures - Standard 1st Aid ONLY
<input type="checkbox"/> Allergic To Seafood Or Shellfish	<input type="checkbox"/> G-Tube Feeding/ Replace - (SPHC)	<input type="checkbox"/> Seizures - VNS Implant - (ECP)
<input type="checkbox"/> EPI PEN /Auvi-Q STUDENT CARRIES	<input type="checkbox"/> Hearing Loss Severe	<input type="checkbox"/> Shunt - (ECP)
<input type="checkbox"/> Asthma - Severe	<input type="checkbox"/> Heart Condition - Serious, Surgery, Pacemaker	<input type="checkbox"/> Solu Cortef Injections- Adrenal Insufficiency
<input type="checkbox"/> EPI PEN AT SCHOOL - (ECP)	<input type="checkbox"/> Immune Deficiency / Suppressed	<input type="checkbox"/> Stroke - See Health File
<input type="checkbox"/> Bleeding Disorder:Hemophilia / Von Willebrand's	<input type="checkbox"/> Medication Taken At School	<input type="checkbox"/> SPHC: Oral/ Trach Suctioning
<input type="checkbox"/> Cancer, Leukemia, Lymphoma	<input type="checkbox"/> Orthopedic Problems	<input type="checkbox"/> Vision Loss Severe

Save

Paso 6 - Documentos

1. Haga clic en cada documento en el listado. El documento o el enlace se abrirá en una nueva pestaña. Revise el documento, imprímalo si se aplica a su estudiante.
2. Una vez que cada documento tenga una marca de verificación y ha sido sombreado en verde (lo que significa que lo ha abierto), podrá hacer clic en el botón Confirmar y Continuar.

<input checked="" type="checkbox"/> Family Information	<p>Your signature on the Data Confirmation/Parent Signature Form, as required by Section 48980, indicates you have read the sections of the Education Code in the Annual Notification to Parents/Guardians, also located at www.svusd.org, and you are therefore informed of your rights. It does not indicate approval has been given or withheld.</p> <p>Please open and read the attached documents. If confirmation is required, put a check in the box to confirm you have reviewed the document(s).</p> <h3>Documents</h3> <div><p> Annual Notification To Parents/Guardians *Required **REQUIRED** Please click for the Annual Notification To Parents/Guardians <input checked="" type="checkbox"/> I have read</p><p> Meal Application *Required **REQUIRED** The meal application determines if your family qualifies for free or reduced meals. In addition to your child receiving healthy meals, the application generates additional funding to support different education programs throughout the District. <input checked="" type="checkbox"/> I have read</p><p> Medi-Cal Reimbursement Form *Required <input checked="" type="checkbox"/> I have reviewed</p></div>
<input checked="" type="checkbox"/> Income	
<input checked="" type="checkbox"/> Student	
<input checked="" type="checkbox"/> Contacts	
<input checked="" type="checkbox"/> Medical History	
<input checked="" type="checkbox"/> Documents	
<input checked="" type="checkbox"/> Authorizations	
<input checked="" type="checkbox"/> Final Data Confirmation	
<input type="button" value="Confirm and Continue"/>	

Paso 7 - Autorizaciones

1. Elija una respuesta para cada autorización (ciertas autorizaciones no se aplican a todos los niveles de grado)
2. Haga clic en el botón Guardar.
3. Haga clic en el botón Confirmar y Continuar.

- Family Information
- Income
- Student
- Contacts
- Medical History
- Documents
- 7** Authorizations
- Final Data Confirmation

3

Confirm and Continue

This school does not release information or records concerning your child to non-educational organizations or individuals without your consent. Also, the release of certain information could benefit your child, such as information on athletic or academic awards, information for news releases, or information to organizations and graduates. Your consent is required for the release of such information.

Authorizations and Prohibitions	
Description	Status
<p>* Student Media Release Press television, other digital and print news media; District, school, and public web sites (information concerning participation in athletics, activities, the winning of honors and awards, and other such information); District and school social media.</p>	<div style="border: 2px solid red; border-radius: 50%; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">1</div> <input checked="" type="checkbox"/> Allow <input type="checkbox"/> Deny
<p>* Allow my child to access the Internet / SVUSD Network</p>	<input checked="" type="checkbox"/> Allow <input type="checkbox"/> Deny
<p>* Allow release of student information to PTA, PTSA, PTO (providing release also allows images and names in yearbooks) Including images and names in yearbooks.</p>	<input checked="" type="checkbox"/> Allow <input type="checkbox"/> Deny
<p>Allow release of student information to Orange County Registrar of Voters 18 years or older.</p>	<input checked="" type="checkbox"/> Allow <input type="checkbox"/> Deny
<p>Allow release of student information for Recruitment Opportunities Official employment or recruitment representatives of private industry; Federal and State Legislators; federal, state, and local government agencies. (12th grade only)</p>	<input checked="" type="checkbox"/> Allow <input type="checkbox"/> Deny
<p>Allow release of student information to Military forces of the United States 11th - 12th grade only.</p>	<input checked="" type="checkbox"/> Allow <input type="checkbox"/> Deny
<p>Allow release of student information to Colleges and Scholarship Organizations Including transcripts/test scores for application and scholarship requirements.</p>	<input checked="" type="checkbox"/> Allow <input type="checkbox"/> Deny
<p>* Allow release of student information to Non-profit Organizations Benefiting SVUSD schools, e.g. SV Educational Foundation, Booster Clubs.</p>	<input checked="" type="checkbox"/> Allow <input type="checkbox"/> Deny
<p>* Allow release of student information to Medi-Cal for Reimbursement I understand and agree that the SVUSD may use Medi-Cal, other public benefits, or public insurance programs to offset the District's cost for the provision of Medi-Cal related services. I also agree for this limited purpose, to allow the District to share the following information regarding my child as part of this process: *Student name, *Student date of birth, *Student evaluation and referral information (for related services), *Student Individual Education Plan (IEP), relevant goals, and progress notes (as appropriate).</p>	<input checked="" type="checkbox"/> Allow <input type="checkbox"/> Deny
<p>I acknowledge and understand that I must request paper report cards and progress reports from the school Paper report cards will no longer be mailed. Grades are available online via the Family Portal.</p>	<input checked="" type="checkbox"/> Yes
<p>* I elect to receive messages distributed, on behalf of SVUSD, through the School Messenger System</p>	<input checked="" type="checkbox"/> Elect <input type="checkbox"/> Deny
<p>Allow release of student transcript data to CaliforniaColleges.edu SVUSD has transcript-informed functionality with the California College Guidance Initiative (CCGI) to help your child develop a well-informed college and career plan. With transcript-informed functionality in CaliforniaColleges.edu, SVUSD students have access to exclusive tools and resources to support their college and career planning. These resources are only provided when students' transcript data is uploaded from the SVUSD's Student Information System (SIS) into CaliforniaColleges.edu in accordance with all state and federal student privacy laws. (grades 7-12 only)</p>	<input checked="" type="checkbox"/> Allow <input type="checkbox"/> Deny
<p>* Does your child have internet access at home? Saddleback Valley Unified School District wants all students to have high-speed internet access at home to assist in completing schoolwork.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p>* Is your primary home internet access provided through a cell phone or cellular hotspot?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p>I verify that my child and I have read and understand the information in the Annual Notification to Parents/Guardians Booklet, 2022-2023, and agree to abide by the policies of the Saddleback Valley Unified School District. testing adding a note to the aut</p>	<input checked="" type="checkbox"/> Yes
<p>* Response Required</p>	<div style="border: 2px solid red; border-radius: 50%; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">2</div>

Paso 8 - Confirmación Final de Datos

1. Una vez se completan todos los pasos, puede volver atrás y revisar sus respuestas haciendo clic en cualquiera de las pestañas. Cuando esté listo para entregar sus datos, haga clic en el botón Finalizar y Enviar.

Family Information ✓

Income ✓

Student ✓

Contacts ✓

Medical History ✓

Documents ✓

Authorizations ✓

Final Data Confirmation ✓

Finish and Submit

Please click the Finish and Submit button.

2. Recibirá un mensaje agradeciéndole por confirmar los datos de su estudiante.
3. Haga clic en el enlace para imprimir y firmar el Formulario de Firma de la Notificación Anual. *Este formulario debe imprimirse y una copia impresa con las firmas del estudiante y el padre/madre debe ser entregada a la escuela de su estudiante.*

STUDENT NAME: (PRINT) _____ GRADE: _____
NOMBRE DEL ESTUDIANTE: (LETRA DE MOLDE) _____ GRADO _____

Saddleback Valley Unified School District

Annual Notification to Parents/Guardians Signature Form

As the parent/guardian of the student named below, I verify that my child and I have read and understand the information in

Family Information ✓

Income ✓

Student ✓

Contacts ✓

Medical History ✓

Documents ✓

Authorizations ✓

Final Data Confirmation ✓

Thank you for confirming the student data in the system.

Step 1:

[Click here to Print, Sign & Return Annual Notification Signature Form](#)

Step 2:

[Click the button below to print your student's Emergency Card](#)

Print New Emergency Card

4. Haga clic en el botón Imprimir Nueva Tarjeta de Emergencia para su estudiante. Esto le mostrará toda la información que acaba de confirmar, y *muchas escuelas requieren que imprima y traiga una copia con usted a la inscripción como prueba de que ha completado el proceso de Confirmación de Datos en línea.*

Student Information Page 1

Student ID	Last Name	First Name	Middle Name	Gender	Grade	Birthdate
123456	Student	Sammy		Male	1	01/10/2016

Resid Address: 123 Via Amor, Rancho Santa Margarita, CA 92688

Student's Mobile Email: students456@mysaddleback.org

Parent/Guardian Information

Mr & Mrs. Student	Primary Phone	(949) 555-1212
Language: English	Primary Contact 1:	
	Primary Contact 2:	

Emergency Contacts

Father o. Student (lives with)	Mobile	
Father	Phone	(949) 555-1212
fatherstudent@gmail.com		
Mother o. Student (lives with)	Mobile	
Mother	Phone	(714) 555-1212

Authorizations

Authorization Type	Authorization Code	Date	Status Dt	Status
1 Prog Participation Authorization or	IMD Student Media Release	06/30/2022	06/30/2022	Granted
1 Prog Participation Authorization or	INT Allow my child to access the Internet / SVU	06/30/2022	06/30/2022	Granted

Parent/Guardian Signature

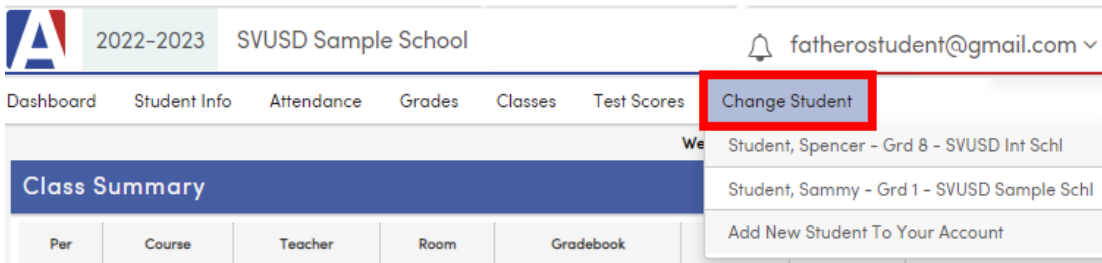
Date

Parent/Guardian Signature

Date

Completar la Confirmación de Datos para Varios Estudiantes

El proceso de Confirmación de Datos debe completarse por separado para cada estudiante inscrito en SVUSD. Cuando utilice la antigua interfaz del Portal para Padres, haga clic en el menú **Cambiar Estudiante** y elija el siguiente estudiante para el que necesita completar la Confirmación de Datos.



Cuando utilice la nueva interfaz del Portal para Padres, haga clic en la tarjeta de su estudiante (resaltada en amarillo) en la página de inicio, o haga clic en la flecha que apunta hacia abajo (en un círculo rojo) en el encabezado para ver su lista de estudiantes.

