## ERLANGER/ELSMERE SCHOOL DISTRICT

## **ON-LINE REGISTRATION – RETURNING FAMILIES**

Please follow these directions to register a student if the family has students in the Erlanger/Elsmere Schools

On the Erlanger/Elsmere Schools website:

https://www.erlanger.kyschools.us/



You will be entering the Parent Portal of Infinite Campus to start the process. You will be able to update your existing information and register your child for the upcoming year.	Infinite Campus
Select "Campus Parent"	Erlanger-Elsmere Independent
	Campus Student
	Campus Parent

If you not set up your Parent		Campus Parent
Portal, you need to select "New User". Follow the steps	Erlanger-Elsmere Independent	Announcements
below to do so	Single Sign-On (SSO)	Tuesday 08/11/2020 Parent/Guardians
	Parent Username	-Please click on New user? If you are activating your account for the first time. From there you can log-in and create your user name and password.
If you have already set up your Parent Portal, enter your Username and	Password	<ul> <li>Annual Updates for Existing Families - Please log-in and click on More &gt; Online registration &gt;Follow the directions to do your annual updates and school releases. Any changes from the previous school year can be made here along with adding a new student who use at registration and the form. Discase of users achieved school school hered users here.</li> </ul>
Password.	Forgot Password? Forgot Username? Help	any questions.
You can skip the next few slides.	Log In to Campus Student or New User?	

To set up your Parent Portal, you will need an Activation Key. You will need to contact the school your child attends to get this code.

After entering the code, select "Submit".

11	
ed	New User?
	Activate your Campus Portal account by entering the activation key sent to you by your district.
<u> </u>	If you do not have an activation key, please contact your district to obtain one.
	Activation Key *
_	• This field is required
	Submit
	Back to Login

Create a Username, Password.

Retype the same Password.

Remember this information. You will need it to enter the Parent Portal each time. You will want to enter the Portal every year to register students, update information, access messages from the school and/or teacher, and check your child's grades.

Create Campus Parent Account	
Welcome Donna Schulte!	
Username *	
dsch123	
Password *	0
Confirm Password *	
Password Strength	0%
Submit	
Back to Login	

New User?

Select "Submit" when finished.

	Erlanger-Elsmere Independent
Once you create the Parent Portal or if you already have an account, type your Parent Username and Password.	Single Sign-On (SSO) or Parent Username
Select "Log In" to begin.	Password Log In
	Forgot Password? Forgot Username? Help Log In to Campus Student
	or

## Announcements

Tuesday 08/11/2020 Parent/Guardians

-Please click on New user? if y you can log-in and create your

 Annual Updates for Existing | registration >Follow the direct changes from the previous sc who was not previously enroll any questions.









Complete or update	* Indicates a required field								
information.	▼ Student(s) Primary Household	OParent/G	uardian (	Semergency C	Contact	)Other Hous	sehold	Stude	nt Completed
	* Primary Phone								
				<u>c</u>	Contact Preferences				
	Primary Phone		Emergency	High Priority	Attendance	Behavior	General	Teacher	Private
Select "Next". 🔨	(839)123 - 4367	Voice Text(SMS)							
	Description of Contact Preferences Emergency - Marking this checkbox will High Priority - Marking this checkbox will Behavior - Marking this checkbox will use General - Marking this checkbox will use Teacher - Marking this checkbox will use Private - Mark if number should be listed	use this method of II use this method use this method of of this method of of this method of of this method of of as private	of contact for eme d of contact for mat contact for atte contact for behavi ontact for general ontact for teacher	rgency messages essages labeled as indance messages. or messages, school messages, in -sent messages, in	High Priority Notifi such as those sent cluding messages i	cation. by the school regarding failin	or district. ng grades and	d missing ass	signments.
	Home Address								

If you address has changed, place a	Student(s) Primary Household     Parent/Guardian     Cemergency Contact     Other Household     Student						
checkmark in the box. 🔨	> Primary Phone						
	* Home Address						
You will need to upload Proof of							
Residency if address changes.	Your address as listed in the portal 123 Commonwealth Ave Erlanger, KY 41018						
	The home address listed is no longer current						
Select "Next".	Please upload a utility bill to prove residence in the district. Upload Utility Bill / Proof of Residency						
	Previous     Next						
	Student Release Documents						
	SaveContinue						

The highlighted	
	Student(6) Primary Household Meanent/Guardian Campieted
documents are required	> Primary Phone
pieces of information that	Home Address
explain many of the	Student Release Documents     It is required that you open and review each of the documents below for your household. There will be questions you must answer later in the Student Dillower enders. The will around your documents below for your household, there is the source of the students
policies in our District.	the student kelease section. This will prevent you norm having to open these documents multiple times for multiple students.
Later in the process, you	Medication Policy FERPA Document Student Directory
will be asked to sign that	Acceptable Use Policy Chromebook Contract
you have read them and	ILP Document Photo Release Doucument
agree to the information.	4 Previous
This is your chance to	Save/Continue
select each one so it will	
open and read each documen	t.

Select "Save/Continue" once you have read each document.

You will see the students that are already in your household from previous years. You may click on "Edit/Review" to update	✓ Student(s) P Student	rimary Househ	old	Parent/Guardian	nergency Contact	V Other Ho	usehold Student
any information on each	First Name	Last Name	Gender	School	Completed	Record Type	
student.	Susan	Schulte	F	Arnett Elementary School		New	Edit/Review
	Please include all	students that nee es that person is m	d to be enrolle	<u>d.</u> I information. Select the highlighte	ed row to continue.		
If you have a new student to	<ul> <li>Indicates the</li> </ul>	at person is comple	eted.				
add, click on "Add New Student"	Add New Stude	nt					
to work through the screens and	Back Sa	ve/Continue					
to get him/her enrolled.							

These screen shots will walk you through some of the registration steps for a new student. Some information may already be in IC due to the other household students. Use these only as a guidance.

Complete the required information on your child.

	Indicates a required field						
Upload a picture of legal	🗸 Student(s) Primary Household 🔰 🗸 Parent/Guardian 🖕 🗸 Emergency Contact 🌔 🖌 Other Household 🌓 💌 Student	impleted					
birth certificate (Not the	Student Name: Susan Schulte						
hospital certificate). If 🔪	* Demographics						
unable to upload, please	There will be a few steps for each student you enter. The first is general demographic information. Please verify or add the information below. Please update any information the student's name exactly as it appears on the birth certificate. If your student has two last names, please enter both in the box marked "last name". Please ender toxin re	on that is incorrect. Please enter ames without a dash in between.					
send a conv to the	Legal Middle Name Susan " Gender Female ♥ " Enrollment Grade Legal Middle Name Foreign Exchange" School"	00 ♥ * Arnett Elementary School ♥					
incoming school.	Legal Last Name Schulte						
Choose the grade the	animole     Date       bith regularity State Law 158.032**     U.S.						
student will be entering:	Please upload a Birth Certificate.						
00= Kindergarten	Upload Birth Certificate						
99= Preschool	▶						
Salact "Navt" when	Next >						
Select Next when	> Race Ethnicity						
finished.	> Housing						
	Student Services						



Complete the	B kyede3.infinitecampus.org/campus/olr2/coreOLR/portal/shell.xsl?x=olr2.Olr2Outline&mode=onlineregistration&applicationMode=new&login=&kiosk=&x=olr2.coreOLR.Olr2Main-appTypeCheck&x=olr
complete the	▼ Housing
required fields.	The following questions address the McKinney-Vento Act 42 U.S.C. 11435. Answers to these questions will help determine services the student may be eligible to receive.
	Is the student's current address a temporary living arrangement?
	Is this temporary living arrangement due to loss of housing or economic hardship?
	If the answer to both of these questions is Yes, please indicate where the student is living:
Select "Next" when	4 Previous. Next b
finished.	
	Student Services
	Language Information
	> Previous School
	School Safety and Discipline

<b>a i i i i</b>	→ Race Ethnicity	
Complete the	► Housing	
required fields.	Student Services	
required fields.	Does your student have a current IEP?	
	Does your student have a current 504 plan?	
	Has your student previously received gifted/talented services?	
Select "Next"	« Previous Next »	
when finished —		
when misneu.	* Language Information	
	Previous School	
	School Safety and Discipline	
	▶ Relationships - Parent/Guardians	
	Relationships - Emergency Contacts	
	Egal Documentation	
	Relationships - Other Household	
	Health Services - Emergency Information	
	Health Services - Medical or Mental Health Conditions	
	Health Services - Medications	
	→ Release Agreements	
	Cancel Save/Conlinue	

Complete the	* Language Information					
required fields.	Please enter language information for your student below.					
•	1. What language is most frequently spoken at home?					
	2. What language did your child learn when he/she first began to speak? 🗸 🗸					
	3. What language does your child most frequently speak at home?					
	4. In what language do you most frequently speak to your child?					
	Did you select a language different from English on any of the above four questions?					
Select "Next" when						
finished.	( revuse Next )					
	Previous School					
	School Safety and Discipline					
	> Dalationshine - Darent/Guardiane					

Complete the required	C Online Registration - Google Chrome -						
complete the required	🔒 kyede3.infinitecampus.org/campus/olr2/coreOLR/portal/shellxsl?x=olr2.Olr2Outline&mode=onlineregistration&applicationMode=new&login=&kiosk=&x=olr2.oreOLR.Olr2Main-appTypeCheck&x=						
fields. If registering a child	▼ Previous School						
that has been in another school district, this information is helpful.	Please enter information regarding this student's prior schools.						
	Last Year School						
	City         State         Country         Phone         Please upload a recent transcript for this student.         Upload Transcript or report card						
Select "Next" when ——							
finished.	4 Previous Next >						
	School Safety and Discipline						
	Relationships - Parent/Guardians						
	2 BolyHourklas Emonsoner-Fostback						





Select "Next" when finished.

ede3.infinitecampus.org/campus/olr2/coreOLR/portal/shell.xsl?x=olr2.Olr2Outline&mode=onlineregistration&applicationMode=new&login=&kiosk=&x=olr2.coreOLR.Olr2Main-appTypeCheck&x=olr2.coreOL You will do the same with \* Relationships - Emergency Contacts Emergency Contacts (People Authorized to Pick Student Up From School) **Emergency Contacts**, A minimum of (1) Emergency Contacts are required\* linking them to the child No Relationship Name Relationship\* Friend ¥ or Contact Sequence\* John Smith 2 1 you are registering. Describtion 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 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 exist. Emergency Contacts (People Authorized to Pick Student Up From School) Select "Next" when finished. Prev 
 Next 
 Next Legal Documentation > Relationships - Other Household Health Services - Emergency Information Health Services - Medical or Mental Health Conditions Health Services - Medications Conline Registration - Google Chrome - o kvede3.infinitecampus.org/campus/olr2/coreOLR/portal/shell.xsl?x=olr2.Olr2Outline8/mode=ol stration&applicationMode=new&login=&kiosk=8x=olr2.coreOLR.Olr2Main-appTypeCheck&x=olr2.co If there are any legal Housing > Student Services documents, including custody Language Informat paperwork that you need to ▶ Previous School School Safety and Discipline submit, you may select "yes" ▶ Relationships - Parent/Guard Relationships - Emergency Contacts and upload them here. If you \* Legal Documentati → ~ are unable to upload, please Do you have any form of legal documentation stating that any person(s) may NOT pick up your child h (If "yes" is checked, please provide a copy of legal documentation with this enrollment form. send a copy to the incoming Upload Legal Documentatio school. 4 Previous Next ► s - Other Household th Services - Emergency Information + Health Services - Medical or Mental Health Condi Select "Next" when finished. + Health Services - Medications ► Re se Agreements Cancel Save/Continue kyede3.infinitecampus.org/campus.org/campus/olr2/coreOLR/portal/shell.xsi?x=olr2.Olr2Outline&mode=onlineregistration&applicationMode=new&login=&kiosk=&x=olr2.coreOLR.Olr2Main-appType(
 Previous School You will need to link the individuals > School Safety and Discipline that you added that live in another > Relationships - Parent/Guardian Relationships - Emergency Contacts household. These will probably be Legal Documentation some of your emergency contacts. ships - Other Household Relationship\* No Relationship Name John Doe 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. Select "Next" when finished. ious Next + + Pri Ith Services - Emergency Information rvices - Medical or Mental Health Conditions th Services - Medicat Save/Continue

You will be asked medical information.

Please complete the fields. If you are interested in using one of the Health Point clinics located in our schools, you will need to complete the two attached forms.

You may complete them and upload or send into the incoming school. You will only need to do this to utilize the services at the clinics within our schools.

r Lugar oocumunation	
Relationships - Other Household	
<ul> <li>Health Services - Emergency Information</li> </ul>	
Primary Care Provider	Dr. Smith
Primary Care Phone	(123) 456 - 7890
Dental Care Provider	Dr. Teath
Dental Provider Phone	(123 ) 456 7890
Does your child have health insurance?	Yes 🗸 *
If yes, What kind? ** Please be prepared to provide documentation directly to the school nurse regard documentation at your registration appointment. Health Point will again partner with The Erlanger Elsmere School District to provide	Humana ing any and all health conditions/concerns and medications. You will be required to provide immunization health services. If you would like to use the health services that Health Point provides please clink on the link be
If view, What kind? *** Freese be prevaled to provide documentation directly to the school nurse regard documentation at your registration appointment. Health Point up again partner with the Erinagre Elineares School District to provide and fill out the Health Point Errollment Packet. You can call (359) 342-2411 if you h (359) 342-2411 if you h (359) 342-2411 if you h Comparison of the Comparison of the Comparison of the Comparison of the Health Point Document Upload	Humana ing any and all health conditions/concerns and medications. You will be required to provide immunization health services. If you would like to use the health services that Health Point provides please dink on the link be ave any questions. You can upload the document using the upload link below or you can fax the document to

Select "Next" when finished.

Diasco complete the required field	Conline Registration - Google Chrome - G				
Please complete the required held.	kyede3.infinitecampus.org/campus/olr2/coreOLR/portal/shellxsl?x=olr2.Olr2Outline&mode=onlineregistration&applicationMode=new&login=&kiosk=&x=olr2.coreOLR.Olr2Main-appTypeCheck&x=olr2.coreOLR.				
	Race Ethnicity				
	Housing				
	Student Services				
	Language Information				
	Previous School				
	School Safety and Discipline				
	Relationships - Parent/Guardians				
	Relationships - Emergency Contacts				
Salact "Novt" when finished	> Legal Documentation				
	Relationships - Other Household				
	Health Services - Emergency Information				
	▼ Health Services - Medical or Mental Health Conditions				
	No medical or mental health conditions				
	Health Services - Medications				
	P Release Agreements				

Please complete the required field.			
	agreement sector outgreen provide and obsciptine > how and a sector outgreen provide a		
Description at a description of the state of the second	Relationships - Parent/Guardians		
Does this student take medications?	Relationships - Emergency Contacts		
$\sim$	Legal Documentation		
An un-to-date immunization record on $\mathbf{X}$	Relationships - Other Household		
	Health Services - Emergency Information		
a Kentucky form is required. You can	Health Services - Medical or Mental Health Conditions		
	* Health Services - Medications		
upload it at this link.			
If you are unable to upload, please send	Add Medication		
it in to the incoming school	Please upload a copy of immunization records.		
it in to the incoming school.	Upload Immunizations		
	( Preduce Next >		
Select "Next" when finished.			

	C Online F	Registration - Google Chrome						- ø ×
This is the page that you need to		Kyede3.infinitecampus.org/campus/oir2/coreOLR/portal/shell.ss?x=oir2.Oir2Outline&mode=onlineregistration&applicationMode=new&login=&klosk=&x=oir2.coreOLR.Oir2Main-appTypeCheck&o     Release Agreements						
		* Release Agreements The following questions must be check prior to enrolment.						- 1
acknowledge all of those documents that	IC	* 1 acknowledge receipt of and accept the EES District. Code of Acceptable Student Behavior and Discipline * 1 acknowledge receipt of and accept the district medication policy.						
you read earlier. You will need to add		🖉 * 1 acinovieloge roceining information regarding my rojats under the Referal Educational Rights and Privacy Act						
checkmarks and answer questions		The following yes or no questions will not keep a student from being enrolled regardless of the answer chosen.						
		2. Please answer "yes" of	al page of the AUP, the or "no" to agree to the c	check to the left and my signature below monocheck Contract.	access to the internet. In he	a or signing and returning the Studen	Yes V	
		<ol> <li>(Grades 6-12 only) 1 hereby acknowledge that parties to have access to</li> </ol>	acknowledge receiving t it I have read and under to his/her ILP information	he Individual Learning Plan Web Release form from the stood the ILP form, and authorize the District to enable a	Feature of the ILP which we	g the Signature sheet on that form, I percent and student to invite third	NA. 🗸 =	
		4. (Grades 9-12 only) (F Please select "no" if you	ederal law requires that do not give permission	schools release directory information to military recruite for your child's contact information to be released to mili	rs unless a parent explicitly tary recruiters	forbids the release of such information	·) NA •	
Finish by (airein all sources and a with the		5. Prease answer yes of **** I, as legal parent/gut information with school st	ardian, hereby state that taff; paraprofessionals;	noto Herease document the information contained on this online enrollment for coach/volunteers; and emergency personnel and to seek	n is accurate to the best of n medical assistance for my d	ny knowledge. I authorize the school d hild in an emergency.	listrict to share pertinent medical	
cursor/mouse.		As parent/guardian of t policies in this online er	his student, we both ag proliment registration for	ree to abide by all of the m.				
Select "Save/Continue" when finished.		Clear Date of Synature (03/1/2021						
		4 Previous						
		Cancel Save/Cor	ntinue					
	# ×	O Search for anything		o # 😜 🖬 🔒 🚖	🧿 🔳		^ <b>\m</b> # 4	10:34 AM
		onnie Registrati	011				Арріі	cauon number n
		uired field						
You will be asked to confirm that you ha	ve	Buinner Hannels						
read all of the documents earlier.		Primary Housen			ergency Contac	St Other Ho	usenoia	rudent
		ie: Susan Schu	llte	Warning				
		s			6			
		у		You must view all form	s for this person	before saving.		
Salast "Confirm"								
Select Commin .		ices						
		ormation ool / and Discipline s - Parent/Guardians Confirm						
		s - Emergency Contacts						
		entation						
		s - Other Household						
		es - Emergency In	formation					
		es - Medical or Me	ntal Health Co	onditions				
	es - Medications							
If the child you just finished								
	Student(s)	) Primary Househ	old 🚺 🗸 I	Parent/Guardian 🔥 🗸 Eme	ergency Conta	ct 🔹 🗸 Other Ho	usehold	tudent
registering is in yellow, you are								
missing information. You may	_ Student							
select "Edit/Review" to complete	First Name	Last Name	Gender	School	Completed	Record Type		
what is missing.	Susan	Schulte	F	Arnett Elementary School		New	Edit/Review	
-								
If you have another child(ren) to	Please include all students that need to be enrolled.							
register coloct (Add Name	Yellow - Indicates that person is missing required information. Select the highlighted row to continue.							
register, select Add New	Indicates that person is completed.							
Student".								
+	Add New Stu	Ident						
When finished, select	Back	Save/Continue						
"Sour / Continue"								
Save/Continue".								

When you are finished adding children for registration, you need to select "Submit". This will send the information to the schools for enrollment.

Be sure you do not skip this step.

Student(s) Primary Househol
Parent/Guardia
Emergency Contact
Other Household
Contact
Co