Pre-Enrollment (online enrollment) for LGSUHSD: Entering New Student Information

These instructions are intended for an adult parent or guardian who is providing online registration information to enroll a new student in the Los Gatos-Saratoga Union High School District.

The online enrollment typically takes 15-20 minutes if you collect these items ahead of time:

- Residency and immunization documents
- Physician and emergency contact names and phone numbers You have the option to stop at any time and return.

During the online enrollment process, if you have any questions, please email or call the school registrar.

Los Gatos High School: Terri Dewing at <u>tdewing@lgsuhsd.org</u> or 408-354-2730 x231 Saratoga High School: Robert Wise at <u>rwise@lgsuhsd.org</u> or 408-867-3411 x214

Process Overview

•

A) Create an account on the district's online enrollment system

- Select a school enrollment year
- Create a new enrollment account (if you have never done so previously) **OR** log onto your existing enrollment account
- Review terms of service
- Provide student name and address information
- Confirmation process- system validates address matched with school boundaries

B) Enter pre-enrollment information for the student

- Enter the student details and emergency contact information
- Enter information about prior schools
- Review School District Policies and Documents
- Grant Authorizations and Permissions
 - Upload documents
 - Residency
 - Immunization records (not required for students coming directly from CT English, Fisher or Redwood Middle Schools)
- Respond to supplemental questions
- Review Edit Confirm
- Print for your records (optional)
- **Submit** the enrollment information
- Logout **OR** enroll another student
- C) School review and confirmation. School personnel will review your student's information and let you know if there are any issues that must be addressed. When all is complete you will receive a confirmation email message from school personnel that enrollment is accepted, usually within 10 business days for current year, or incoming, year-round enrollments. Please note, if you are pre-enrolling your student (during this November-December, 2023-timeframe) for the 2024-2025 Academic Year and you do not receive a response by mid-January, 2024, please follow up and contact the School Registrar.

BEGIN

1. Using a personal computer web browser, go to <u>https://lgsuhsd.asp.aeries.net/enrollment</u> Choose your preferred language and select **Enroll a New Student**.

Welcome to Aeries Online Enrollment

Los Gatos-Saratoga Union High School District

Aeries Internet Registration allows you to start the process of registering a student for school. Information about the student such as emergency contacts, medical and language information will be collected. In order to complete this process, you will create an account using your email address. After completing the data input requirements, the student's information is electronically sent to the school.

Be sure to add "DoNotReply@Aeries.net" to your <u>Safe Senders</u> list, particularly if you have a hotmail.com email address, or you may not be able to complete the online portion of the registration process because the verification and confirmation email messages may not be delivered or will end up in your spam or junk mail folder.

For enrollment tips, please click <u>HERE</u>.

To get started registering a new student click the Enroll a New Student button. If you would like to reprint or review students previously registered click the Login button below.



2. Select the year for school enrollment, then Next.

Year Selection

2023 - 2024, Current School Year	•
2023 - 2024, Current School Year	
2024 - 2025, Pre-Enrollment	



Required Information

Required information:

- Please use the legal name of the student as it appears on the birth certificate. This will be required for college
 applications and financial aid.
- A valid address within school boundaries. Click here to verify address. Please note: PO Box address will not be accepted for residency or mailing. For further information regarding this policy, contact Tammie Marshall at 408-354-2520, ext. 239.
- General student information.
- Parent/Guardian home and cell number and employer information.
- Name and phone number of emergency contacts.
- Local physician name and phone number.
- Name, address and approximate dates of attendance of only the last school attended. If your student currently attends C.T. English, Fisher or Redwood Middle Schools, please enter it as the most recent school attended and use 06/15/2024 as the leave date.



 If this is your first time enrolling a student with us, complete the Create new account information, then select Create account.

Existing user	Croate pow account
Existing user	Create new account
Email address	Your Name
Password	Email address
Login	Password
-orgot Password	Re-type Password

- *If you have previously enrolled a student with us, please enter your existing user information and select Login (Skip step 5).*
- 5. New Accounts: the system will now send a confirmation message to the <u>parent's email address provided in</u> <u>step 4</u>. Please follow the prompts to complete log in.

	Account Created		
*	Your account has been created but needs to be verified. Please check your email and follow the instructions to finish enrollment. If you do not receive the email, please check your spam or junk mail folder.		
	Next		

Using the information retrieved from your email, please follow the prompts to complete log in.

• Use the "CLICK Here" in email to go back to the login page, or copy the unique URL (shown circled, in example screenshot below) and paste it to your browser.

Los Gatos-Saratoga Union High School District - Aeries Online B	Enrollment	
Enrollment <aeriesreports@aeries.net></aeriesreports@aeries.net>		🖶 Wed, Nov
Thank you for using the Aeries Online Enrollment system. Once your account is act	ctivated, you will be able to continue editing your student's information. To activate your account Click Here – If this link does not work, copy and then paste this unit https://gsubsd.asp.aenes.net/ar/VentyEmail	
complete the login as prom	ipted	
	Login	
	Email address	
	Password	
	Login	
	Forgot Password New User	

6. Read the Terms of Service and scroll to the bottom. Select I Agree, then Next.



7. Complete the Student's Name page. Select Next. *Note when you click NEXT, but remain on same page, with red text highlighting the required fields that still need to be filled in before you can move on in the form.

Student	's Name
Student's legal first name	Student's nick name (optional)
Please enter the student's first name	
Student's legal middle name	Student's legal last name
	Please enter the student's last name
Studentie suffici	
- V	
Month V Day Vear Vare: 14	Please select a grade level or program to enroll this student in
Hondi + Day + Hear + Mge. 14	Select Grade Level or Program 🔹
	Please select a grade or program
	Next

8. Enter the **student's place of residence**. On this page, please provide mail delivery address if different than the resident address provided. Select **Next**.

Student Address	
Resident Address	
Street Address	
Enter address	
Unit or Apartment Number	
City	
Student's Home ZIP Code	
California	•
 Se residence address above as mailing address? ● Yes ○ No, use a different address for mail 	Ļ
Previous	Next

9. When the address entered agrees with the school boundary tables, you will get these two messages. Select **Next**.

	on grade and address information you are assigned to the following school
Assigi Garato	ned school ga High School (Seventh Grade - Twelfth Grade)
Prev	igus
	New Enrollment Added
new	enrollment for Donald Duck has been added to your account.
new 9	enrollment for Donald Duck has been added to your account. The remainder of the process will require approximately 15-30 minutes. If you are unable to complete this process in one sitting, you may save your progress and resume the process at a later time by logging into your account using your email address and password.

*Informational Tips: you may skip to go to Step 10

• DO NOT USE back arrow; USE the PREVIOUS button instead at the bottom of each section or screen where available. You will have an opportunity to review your responses to make any changes necessary towards the end of this process---before you select SUBMIT.

DO NOT USE BACK ARROW on browser bar

C Igsuhsd.asp.aeries.net/enrollment/register-confirm.aspx

• You can exit at any time and the system will remember the information entered previously. If you decide to exit, you will see this page when you return. Select **Resume**.

My Account			
Please complete the enrollment process for each individual student before adding any additional students.			
Pending Enrollments			
Student	Started	Options	
Captain Awesome	07/24/2020	Resume	
You have no completed enrollments			
Change Email Change Password			
nguage ⊚ English _ Español _ Việt (○中文 ○ 한국어		
		Enroll A New Stude	

10. Enter General Information about your student. Select Next

hudentle sender	Chudentle bener about averbag	Chudantle makile akana averbar
Choose a Gender	Student's nome phone number	Student's mobile phone number
lease select a gender		
tudent's email address		
ease provide STUDENT email only. Parent ema	ails will be collected in another step.	
The following two questions are re	quired by federal law 🖲	
Is this student Hispanic or Latino?		
 Declined to State 		
○ No, not Hispanic or Latino		
○ Yes, Hispanic or Latino		
What is the race of this student? Yo	ou may select up to five.	
American Indian or Alaskan Nativ	e	Chinese
🗆 Japanese		🗆 Korean
Vietnamese		🗆 Asian Indian
🗆 Laotian		🗌 Cambodian
Hmong		Other Asian
🗆 Hawaiian		🗆 Guamanian
🗆 Samoan		🗆 Tahitian
Other Pacific Islander		🗆 Filipino
Black or African American		□ White
Declined to State		
/hat is the highest parent education Gelect Education Level	level?	

11. Enter Language Information, and select Next. *Please note, this is about the student's language experience, not the adult or parent filling out this form.

Language Information	~
The California Education Code requires schools to determine the language or languages spoken at home by each student. Please answer the following questions by selecting the appropriate language.	
Which language did your child learn when he/she first began to talk?	
Select Language	•
Which language does your child most frequently speak at home?	
Select Language	•
Which language do you (the parents or guardians) most frequently use when speaking with your child?	
Select Language	•
Which language is most often spoken by adults in the home? (parents guardians, grandparents, or any other adults)	
Select Language	•
Provious	lovt
	ICXL

12. Enter parent/guardian information. Please enter <u>at least one</u> parent or guardian who has the right to make custodial decisions regarding student. Please do not skip the Parent Education Level if parent/guardian lives with student. Scroll down to the bottom of the page and select Next when finished.

Parent Information	
Please provide information about parents/guardia parents/guardians who do not live with the stude	ins who live with the student. Information about nt will be collected in the next step.
The state of California is collecting the Parent Educat select the Education Level for the parent(s)/guardian	tion Level for parent or guardian student is living with. Please (s) the student is living with.
arent/Guardian #1	
First Name	Last Name
Relationship to student	Allow Access to Portal 🖸
Select Relationship	Choose an option
Email address	Does this parent/guardian live with the student?
	Choose an option
Mailing Name	What is the highest parent/guardian education level?
	Select Education Level
Address	
City	State
	Select State
ZIP Code	Primary phone number
Cell phone number	Work phone number
Extension	Alternate phone number
Employer Name	Employer Address
rent/Guardian #2	
First Name	Last Name
Relationship to student	Allow Access to Portal 🕐
Select Relationship	Choose an option
Email address	Does this parent/guardian live with the student? Choose an option
Mailing Name	What is the highest parent/guardian education level?

13. Complete the Restrained Individual page. Select Next.

Restrained Individual	~
Please provide as much information about the restrained person as possible.	
Is there an individual who is restrained from contact with this student by court decree? No, there is not an individual restrained by court decree Yes, an individual is restrained by court decree	
Previous	Vext

14. Provide Local Physician information. This is a critical contact for the school in case of student injury or illness. Select Next.

Local F	Physician Information 🗸 🗸
Please provide as much information about the student's physician for the student you may want to ask a next do	local physician as possible. If you are new to the area and do not have a or neighbor for the name of a physician, or enter a nearby hospital or clinic.
First Name	Last Name
Name of medical facility	Medical facility address
Primary phone	Cell phone
Work phone	Extension
Alternate phone	
Previous	Next

15. Provide **Emergency Contacts**. Please provide <u>at least one local person</u> who is <u>not</u> the parent/guardian. Scroll down to the bottom of the page and select **Next** when finished with all the contact entries.

nergency Contact #1	
irst Name	Last Name
Relationship to student Select Relationship	•
F	*
failing Name	
Address	
	Chata
.ity	State
IP Code	Primary phone number
Cell phone number	Work phone number
vtension	Alternate phone number
	Employer
mployer Address	

16. Complete the student **Health Survey**. Select **Next**. *You must select **ADD** <u>after each entry</u> to SAVE record; when finished entering each medical or health concern, then select Next to move onward.

	Health Survey	~
0	Please provide a list of any medical conditions this student has by selecting a medical condition from the dro down selection and click Add (to save entry). You may provide additional information about the condition in the comment area.	p
Pleas	e be sure to click the "Add" button after selecting a Medical Condition.	
	If your student has a health condition that requires medication, care or support at school, the District must have a signed Health Care Plan on file. Care plans are good for one year from the date signed, and therefore must be updated annually. Please see and complete the associated form(s) HERE. Please contact the Schoo Nurse Office if you need further assistance.	'
Ad	d A Medical Condition	
Med	ical Condition	
Sele	ect medical condition	•
Com	iments	
Ente	er any comments or notes regarding this condition here.	,
Ad		
Previo	pus	ext

17. Complete the **Other District Enrollments** page about prior schools. At the TOP, please enter information about the 1st U.S. school attendance (TK-12th; please exclude any preschools).

as this student previously attended a TK-12 (Trans	itional Kindergarten to Grade 12) school in the United States?
 No, this student has not previously attended a TK Yes, this student has previously attended a TK-12 	-12 (Transitional Kindergarten to Grade 12) school in the United States (Transitional Kindergarten to Grade 12) school in the United States.
If this student has attended a middle school, priprovide as much information as possible for up	vate school, out of state school or school outside of the U.S., please to the last four schools.
*Please provide and complete at least the most	recent school information so we can successfully track down records
If you are not certain of the exact enter and leav started sometime in August of 2022, you may e	re date, please enter an approximate day. For example, if the student enter August 1st, 2022.
revious School #1	_
Enter Date	Leave Date
Month 🗙 Day 🔪 Year 👻	Month 🚽 Day 🚽 Year 🚽
Fata Carda	Leave Conde
Select Grade Level	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
District Contact Name	Was this student expelled?
Phone Number	Was this student in special education?
Fax Number	Was this student on a 504 plan?
District Name	School Name
Street Address	City
State	ZIP Code
Comment	
revious School #2	
Enter Date	Leave Date
Month - Day - Year -	Month 🚽 Day 🚽 Year 🚽

You may enter up to 4 schools. Please complete <u>at least</u> the most recent school information so we can successfully track down records. Scroll to the bottom and select **Next**.

18. Please review the **School District Policies and Documents**. <u>CLICK on each box to view</u>. Each section will turn GREEN after review and box is checked. After acknowledgement to each is completed, select **Next**.

Documents	
I Annual Notification To Parents (Parent/Guardian Acknowledgement) 중	*Required
Annual Notification To Parents (Student Acknowledgement)	*Required
Student Technology Use Policy	*Required
Activity Agreement	*Required
Service Program	*Required
Williams Complaints Notice	*Required
Student Accident Insurance Information and Application	*Required
evious	Ne

19. NEXT, please select and complete the Annual Permissions and Authorizations to School District Policies and Agreements.

For families pre-enrolling student(s) for next year, you will be notified before school starts and have the opportunity during the **Annual Parent Data Confirmation** to review and re-confirm your selections.

Author	izations 🗸	Release of Directory Information to Military The No Child Left Behind Act of 2001 requires school district to disclose the pages addresses and telephone	Tech Use Agreement Please review the Technology Acceptable Use Agreement.
Armed Forces family member Is at least one parent/guardian on active duty in the Armed Forces or on full-time National Guard duty? Choose an option	Acknowledgement of Annual Rights Notification I hereby acknowledge receipt of information regarding my student's rights, responsibilities, and protections. The Annual Notification to Parents is available through http://www.lgsuhsd.org/antp	numbers of high school students to military recruiters upon request. By choosing "yes," I am giving permission for the school to release said directory information to military personnel. By choosing "no," I am requesting that the school NOT release	by circuing yes, rain actionedging that iny suderic will abide by the technology use rules outlined in the agreement. (Should the student commit any violation, his/her access privileges may be revoked, school disciplinary action may be taken, and/or appropriate legal action pursued."
	Choose an option	said information to military personnel.	Choose an option 🔻
Acknowledgement of School Attendance Policy My student and I understand and will abide by the school's Attendance Policy stated in the Annual Notification to Parents and on the school's website.	Medical Insurance I acknowledge that Los Gatos-Saratoga Union High School District does not provide medical insurance for student injuries but does make voluntary student insurance available.	Choose an option Los Gatos-Saratoga Union High School District Zero Tolerance Policy Expulsion must be recommended for the following behaviors:	
	Choose an option	1. Causing serious physical injury to another person	
Voluntary Medical Insurance I have reviewed the information for the Voluntary Medical Insurance program. I understand that if I wish to enroll my student in this program I will complete the paperwork and pay any appropriate costs. Choose an option	Medical Treatment Authorization I have read the Medical Treatment Authorization and authorize the principal or designee to consent to any emergency medical care to be rendered to my student which a licensed health care provider deems necessary. I hereby indemnify the Los Gatos-Saratoga Joint Union High School District, its employees and Governing Board from any liability of any nature in relation to the transportation or treatment of my student. If urther understand that all costs of paramedic transportation, hospitalization, and any examination, X-ray, or treatment provided in relation to this authorization shall be my responsibility. Choose an option	 2. Possession of any knife, explosive, or other dangerous object of no reasonable use to the pupil 3. Unlawful sale or distribution of any controlled substances 4. Robbery or extortion 5. Assault or battery upon any school employee For more information, refer to the Discipline section in the "Annual Notification to Parents" I have read and understand the Zero Tolerance information above. Choose an option 	
Media Release	Release of Directory Information		+
I give permission for my student's picture or video to be used in printed material, in the District or school websites, or in videos about the school. If you do not want your student's picture or video used, contact the school	Directory information may be requested by organizations such as graduation apparel companies, scholarship organizations, vocational and career counseling by colleges and vocational schools.	Previous	Next
registrar.	Choose an option		
Choose an option			

20. This is the **Document Uploads** page. The specific types of acceptable documents are listed. Please scroll down the page to upload documents requested in order to complete this pre-enrollment process.

Document Uploads	\sim
All students are required to provide proof of District residency. Proof of immunization is required previous school <u>is not</u> C.T. English, Fisher Middle or Redwood Middle.	if their
***************************************	****
Proof of Residency	
California Education Code (Section 48200) and District Board Policy 5111 require that a student be enrolled in and attend school that is within the district in which the student's parent(s) or legal guardian(s) reside(s). In accord with State Compl Requirements, I have attached the required documentation as proof of residence for enrollment. I declare under penalty o under the laws of the State of California that the foregoing is true and correct. Evidence that false information was provid result in immediate withdrawal of the student from District schools.	d the iance f perjury ded will
Proof of Residency #1	
ONE of the following forms of parent/guardian's photoID:	
 Current California State Driver's License California ID card Valid Passport or Consulate Issued Picture ID 	
Proof of Residency #2:	
ONE of the following documents with parent/guardian's name and LGSUHSD residence address:	
1. Current valid vehicle registration card	

...Upload the student residency documents. Scroll back-and-up to review types of accepted documents if needed.

Proof of Residency #1		
Upload one item from the #1 list abov	ve	
Files		
Select documents		
Proof of Residency #2		
Upload one item form the #2 list abov	ve	
Files		
Select documents		
Proof of Residency #3		
Upload one item form the #3 list abov	/e.	
Files		
Select documents		
Additional Residency Documents		
Upload additional residency documen	its if needed.	
Files		
Select documents		

21. **Upload Proof of Immunization**. *If your student is coming from C.T. English, Fisher or Redwood Middle Schools then this is not needed (skip and continue to next step).* Select **Next**

Upload a copy Redwood Midd	f your student's immunization record. Not needed if the st e Schools	udent is coming from C.T. English, Fisher or
Files		
Select docu	nents	

22. Please respond to the Supplemental Questions. Select Next.

Suppl	emen	tal Questions	\sim
Does your student have a Special Education IEP?		Home Type	
Choose an option	•	Choose an option	•
School your student most recently attended			
Choose an option	•		
			+

23. Respond to the **Residence Survey**. Please align your selection with the **Home Type** selected in previous Supplemental Questions section (*i.e., If Permanent Housing was selected in the previous selection, then select Permanent Single-Home on this page*

t one of the following options to complete the residence survey:	
Temporary Shelters A temporary residence provided for homeless individuals	
who would otherwise sleep on the street or a temporary residence provided to	
individuals in emergency situations. This is also applicable to children who are in	
temporary residences awaiting permanent placement in foster care.	
Hotels/Motels A temporary residence for homeless individuals usually	
requiring payment or vouchers for lodging and services on a daily, weekly, or	
monthly basis.	
Temporarily Doubled Up A temporary residence where a homeless family is	
sharing the housing of other persons due to the loss of housing, economic	
hardship, or other similar reasons.	
Temporarily Unsheltered A type of residence for homeless individuals that is	
not meant for human habitation, such as cars, parks, sidewalks, abandoned	
buildings, campgrounds, trailer parks, bus and train stations, or persons	
abandoned in the hospital (on the street). A rule of thumb would be to see the	
dweiling as comparable to an automobile in that it shelters but is not adequate	
	 tone of the following options to complete the residence survey: Temporary Shelters A temporary residence provided for homeless individuals who would otherwise sleep on the street or a temporary residence provided to individuals in emergency situations. This is also applicable to children who are in temporary residences awaiting permanent placement in foster care. Hotels/Motels A temporary residence for homeless individuals usually requiring payment or vouchers for lodging and services on a daily, weekly, or monthly basis. Temporarily Doubled Up A temporary residence where a homeless family is sharing the housing of other persons due to the loss of housing, economic hardship, or other similar reasons. Temporarily Unsheltered A type of residence for homeless individuals that is not meant for human habitation, such as cars, parks, sidewalks, abandoned buildings, campgrounds, trailer parks, bus and train stations, or persons abandoned in the hospital (on the street). A rule of thumb would be to see the dwelling as comparable to an automobile in that it shelters but is not adequate

Continue scrolling down the page to complete the **Unaccompanied Youth** and **Additional Children Information.** Select **Next**.

Continue to attend their sch Receive transportation to ar services, if needed, as provid Receive the full protections	ool of origin, if reques d from their school of ed to all other childre	ted by you and it is	in the best interest.	
Receive the full protections	ou to an other enners	en, including free m	pecial programs and eals and Title I.	
homeless children, youth, ar	nd services provided d their families.	under all federal ar	nd state laws, as it rela	tes to
If you have any questions ab	out these rights pleas	e contact your dist	rict's Homeless Liaison	
Yes				
 a student under the age of 1 Yes 	and living apart fror	n parent(s) or guar	dian(s).	
🗹 No				
ditional Children Info	rmation			
you have additional children li	ing with you in your	household?		
Yes				
☑ No				

24. Respond to the Family Military Survey. Select Next.

Yes, at least one parent/guardian of this student is active in the United States Armed Forces.	Armed Forces	s:	
	0	Yes, at least one parent/guardian of this student is active in the United States Armed Forces.	
No, this student does not have a parent/guardian who is active in the United States Armed Forces.	0	No, this student does not have a parent/guardian who is active in the United States Armed Forces.	

25. Respond to the Foster Survey. Select Next.

0	This student is in foster care	
-		
	This student is not in foster care	

26. Almost done! This is your chance to review and change information you provided. <u>Review every item</u> and click on Edit if needed. Scroll to the bottom, select Finish and Submit. You will have the opportunity to print a copy for your records.

Answer in the second of the second			Confirm	~
<section-header> Name of the set of th</section-header>	Bei nee pri	low is a summary of information coll eds a correction. If everything appea nter friendly page will be provided fo	ected for this student enrollment. Click the Edit button on any section that rs correct, click the Finish and Submit below to finalize this enrollment. A or your records.	
Student Name Here Communit formation (choren outs) mande at the school out. Student Name Area Student S First Name Student's Mich Nates Student's Mich Name Student's Birthdame States States <t< th=""><th></th><th>Assigned School: Los Gatos High School (408) 354-2730 20 High School Court Los Gatos 95030</th><th></th><th></th></t<>		Assigned School: Los Gatos High School (408) 354-2730 20 High School Court Los Gatos 95030		
and and the set of the	Ennellenen		Student Name Here	
Envolument completed by Envolument Yaar 2024 Budent's Kirden Xaame Student's	Enrollmen	t ID t Information (changes can only be m	nade at the school)	
Bitcherits First Name 2024 Bitcherits First Name Student's Mick Name Student's Last Name Student's Suffix Grade Student's Bitchary Int or Apartment Number City Cycoole State Bitcherits First Name Student's Bitchary Int or Apartment Number City Cycoole State Bitcherits First Name Student's Bitchery States Filiph School (408) 354-2730 20 High School Court State States Filiph School (408) 354-2730 20 High School Court State States Filiph School (408) 354-2730 20 High School Court State States Filiph School (408) 354-2730 20 High School Court State States Filiph School (408) 354-2730 20 High School Court State States Filiph School (408) 354-2730 20 High School Court State States Filiph School (408) 354-2730 20 High School Court State States Filiph School (408) 354-2730 20 High School Court No States Filiph School (408) 354-2730 20 High School Court No States Filiph School (408) 354-2730 20 High School Court No States Filiph School (508) States Filiph School (508) State Schoo	Enrollmen	t completed by	Enrollment Year	
student's First Name student's First Name Student's Nick Name Student's Suffix Stude			2024	
Suden't & Last Name Suden't & Suden'	Student's	First Name	Student's Nick Name	
Audust a Las ration Audust a Las ration Dublent's SUITA Grade Student's Birthday Int or Apartment Number City Liggode State 90303 State Cos Gatos Hjoho State So Gatos Hjoho State Cos Gatos Hjoho State Cos Gatos Hjoho Diacompanied Youth Status Bernandi Single Home Unaccompanied Youth Status Mainer H Housing Statu Unaccompanied Youth Status Mainer H Housing Classe No Mainer H Housing Status Unaccompanied Youth Status Additional Chidren in Household. No Statis Hjoho Catis Additional Chidren in Household. No Catis Catis Catis Mainer H Forstarus No Statis Mainer H Forstarus No Statis Mainer H Forstarus Catis Catis Catis Intervisition of Information above is correct, click Finish and Submit. After clicking this no further changes can be mader of the United States Armed Forces.	Student	Last Name	Student's Middle Name	
Srade Street Street City City City City City City City Cit	Student's	Last Name	Student's Birthday	
and Sreet Joint or Apartment Number City			Student's Dir diday	
Lator A partment Number City Figrade 19030 Bothool (408) 354-2730 20 High School Court as Gatos 19030 Charles Char	Grade		Street	
Jun or or partment Number Ury Live Live Live Live Live Live Live Live	T			
Bigging Sate Los Gatos High School (406) 354-2730 20 High School Court. Los Gatos Subol	Unit or Ap	artment Number		
5030	Zipcode		State	
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Confirm Page. Optional, select Print and make a copy for your records. Choose to **Enroll Another Student** or **Logout** when finished enrolling student(s).

Cor	ıfirm
Print Enroll Another Student Assigned School: Los Gatos High School (408) 354-2730 20 High School Court Los Gatos 95030	
Enrollment ID	
Enrollment Information (changes can only be made at the school	ol)
Enrollment completed by	Enrollment Year
Student's First Name	Student's Nick Name Student's Middle Name
Student's Last Name	Student's Suffix Student's Birthday
Grade	Street
Unit or Apartment Number	City Los Gatos
Zipcode 95030	State California
Assigned school Los Gatos High School (408) 354-2730 20 High School Court Los Gatos 95030	

Continued from above...scroll to the bottom of the page, select either Enroll Another Student or Logout.

Family Military Survey Response	
Military Status No, this student does not have a parent/guardian who is active in the United States Armed Forces.	
Account Name: Parent-email@gmail.com	Date Completed: 11/15/2023
Logout Enroll Another Student	

The system will generate an automatic notice that you have provided information.

<u>END</u>

What Happens Next?

School personnel will be alerted to review your student's pre-enrollment information in detail. If there are any issues you will be notified. You will receive a personal confirmation email message when all has been reviewed and accepted.

Please note:

- If you are pre-enrolling your student for the 2024-2025 Academic Year, you will receive a response between now and no later than mid-January, 2024. If not, please follow up with the Registrar of each respective school.
- For year-round enrollments for incoming student and families, please follow up with the School Registrar if you do not receive a response within 10 business days.

Los Gatos High School: Terri Dewing at <u>tdewing@lgsuhsd.org</u> or 408-354-2730 x231 **Saratoga High School**: Robert Wise at <u>rwise@lgsuhsd.org</u> or 408-867-3411 x214.

Thank you for taking the time and care in completing this important online pre-enrollment information.