For Parents: How to Complete the Online Registration Application

A step-by-step process on how to complete the online registration application for students enrolling in LBUSD.

Updated Jan. 2025

Click here for Spanish





To Get Started...

Step 1: Visit your school of residence for directions on their specific enrollment process. Step 2: Once you have received instructions from your school, go to Ibschools.net, select the schoolhouse icon for enrollment on the home page. Then select "Click To Enroll Today" on the next page.





Step 3: Login

Log in using your ParentVUE User Name and Password.

If you have <u>never</u> had any students enrolled in LBUSD before, then click "Create a New Account" (only for new families).

If you have ever had a student in LBUSD (current or previous), you will use the ParentVUE login that is associated with <u>that</u> student (if you do not know the login to that ParentVUE account, please contact your school of residence).	Login	
	Long Beach Unified School District User Name:	
	Password: This link is only for parents who have never had any students in LBUSD (including Head Start, CDC, and Special Ed.).	
	More Options A If the icons are not displayed, click on "More Options" to expand the screen.	



Step 3: Login Continued

If you forgot your ParentVUE User Name or Password:

- 1. Click on the "Forgot Password" icon.
- 2. Next, enter the email address you used to set up the ParentVUE account. If you don't remember the email address that you used, or you no longer use that email, contact your school of residence to have it changed.



Good morning,

Step 4: Application Selection

Select the desired application from the icons available.

If you're not sure which application to select, click on "More Info" to open up a description of the application before making your selection.

BEGIN	NIO	
Please select the onli	ne packet you would like to begin	
Annual Student	CURRENT	School of Choice-
Verification	CDC/Head Start	Incoming 6th, 9th Grade Residents
	Registration	Orade Residents
More Info		More Info
	More Info	This application is for
		incoming 6th and 9th grade
		residents but currently
		attending a different district
		or private school and want
		9th grade.



Step 5: Welcome

Read the introduction and click "Continue".

Welcome

O Information

Welcome to the ParentVUE Registration System for families applying to LBUSD. You will need immunization records and emergency contacts to complete the registration process. You have the option to upload your child's birth verification (birth certificate, baptism certificate, or passport) and two documents that verify your home address (electricity, water, or gas bill; rental agreement or mortgage statement). Please note <u>some sites</u> may also require you to provide a hard copy of the documents.

Parents/guardians who enroll their children online during school closures must provide the following original documents to school staff once schools reopen:

- 1. Two proofs of residency
- 2. Immunization records
- 3. Permanent Health History Form
- 4. Official transcripts (middle & high school only)
- 5. Proof of age (i.e., birth certificate, baptismal certificate, etc..)
- 6. IEP or 504, if applicable
- 7. DCFS 1399 Form, if applicable
- 8. Court order, if applicable

Throughout the Online Registration process, you will be presented with a variety of information to enter. Many Steps will have required fields marked by an asterisk (*). You must enter information into these fields before you will be allowed to continue.





Step 6: Student Summary

If you currently, or previously had a student in LBUSD, the student enrollment will display here.

Click "Save And Continue".

Stude	nt Sum	mary	/		
8 Inform	nation				
Students list	ted below are cu	urrent, with	drawn, or gradua	ated students.	
First Name	Last Name	Grade	School Year	School	Status
Ruby	Kim		2020	Burcham Elementary	Student already has an active enrollment for this year
				Save And Continue	



Step 7: Signature

Type your first and last name as your Electronic Signature. If you are receiving an error message and can't proceed, call your school of residence and ask for them to verify how your name is written in our system.

Click "Save And Continue".





Step 8: Family Home Address

If you currently, or previously had a student in LBUSD, your information will automatically populate in the grey box at the bottom of the page. If you would like to make changes, click on the checkbox to submit changes.

Click "Save And Continue" when finished.

Home Address

Instructions

Use the search box to generate your address. This will auto populate the fields below. If you are having trouble finding your address in the search box, remove the directions N, E, S, or W and try again.

Check here if your address has changed.

Address as entered from above:

LONG BEACH, CA 90810	
	Save And Continue >

Step 8: Family Home Address Continued

Error Message

If the address you have on file is outside of the LBUSD boundaries, then you will have to contact the school you are applying to.

If you believe that the error message is a mistake and your address belongs within LBUSD boundaries, you will need to resubmit your address for verification. To do so, select the "change address" button, then select the "Check here..." box and clear all the fields and resubmit your address.

Home Address

Home Address Is Out Of District Boundary

Online registration is only available for families within the Long Beach Unified School District boundaries. If you live outside the boundaries, please contact the school you are applying to ensure your application is reviewed.

Logout

Change Address



Instructions

Use the search box to generate your address. This will auto populate the fields below. If you are having trouble finding your address in the search box, remove the directions N, E, S, or W and try again.

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Check here if your address has changed.

Address as entered from above:

LONG BEACH, CA 90810



Step 8: Family Home Address Continued

If you have a student who is new LBUSD, or if you want to submit any address updates for previous/current LBUSD students, be sure to use the search engine to add your address.

This will automatically populate the fields below, but make sure to review before you click "Save And Continue".

Home Address

Instructions

Use the search box to generate your address. This will auto populate the fields below. If you are having trouble finding your address in the search box, remove the directions N, E, S, or W and try again.

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Date of the address change MM/DD/YYYY Image: Comparison of the address...



Step 9: Family Mailing Address

If you would like your mail to go to an address other than your home, use the address search engine to complete this section.

If you would like your mail and home address to be the same, check the box.

Click "Save And Continue" when finished.





Step 10: Parent/Guardian

If you have students currently, or previously enrolled in LBUSD, this information will automatically populate.

You can edit, delete, or add new parents/guardians by using the options on the left hand side.

Click "Save And Continue" when finished.

Add or update	dd or update Parent/Guardian details.			Status must show "Complete" for all people liste before moving on to the next pa			
	First Name	Name	Gender	Status			
🖍 Edit			Female	Complete			
Edit X Delete			Male	Not Completed			
+ Add Nev	v Parent/Guardia	an					



Step 11: Emergency

If you have students currently, or previously enrolled in LBUSD, this information will automatically populate.

You can edit, delete, or add new emergency contacts by using the options on the left hand side. <u>At least 2</u> <u>emergency contacts need to</u> <u>be added</u>. There is a limit of 6 emergency contacts.

Click "Save And Continue" when finished.

EMERGENCY

Please add at least 2 emergency contacts. If you already have an emergency contact, please verify by clicking on the Edit button.





Step 12: Students

There are 2 sections on this page: Students Registering and Student List.

Student List = Any students that are already enrolled in school at LBUSD **do not need to enroll again**. They will automatically roll over to the next school year.

The only students who should be in the "Students Registering" section are new or inactive students that will be returning to LBUSD.

For returning students, click "Edit Student Info". For new students who have never been enrolled in LBUSD before, click "Add New Student".

STUDENTS

For new students to LBUSD, please enroll online. More instructions can be obtained at your resident school. This application should only be used for new enrollments to LBUSD. All returning students will be automatically enrolled for the next school year. Only complete this application if you have a new student to LBUSD.

Status must show



Current LBUSD students do not need to re-enroll for the next school year. Students are automatically enrolled for the next school year.

Firs	st Name	Middle Name	Last Name	Gender	Grade	Notes
	, 1			Male		Student already has an active enrollment for this year

Step 13: Student Profile



When adding a new student, you will be asked to enter the following information:

- Demographic (full legal name, DOB, gender, etc.)
- Student Contact (student phone and email; NOT the adult's information)
- Student Residence (where the student lives and with who)
- Language (what language the student first spoke, which language the student speaks at home, which language the student + parents speak at home, and which language the adults speak at home)
- Ethnicity/Race
- Health (Physician and Dental contact info.; optional)
- Permanent Health History (health conditions, limitations, and medications if applicable)
- Immunizations
- Previous School
- Special Services (if applicable)
- Relationships (indicating the relationship of adults listed to the student and if there are any court orders you wish to notify the school about)
- Updating the Order of Emergency Contacts (order will indicate who is called first in case of an emergency)
- Application Password (if your home address is outside of district boundaries, you will need to apply with a code provided to you by the District office).
- Reviewing Policies
- Optional Student Insurance
- Optional Questionnaire

You will need to complete each page before you can select "Save And Continue". We will provide screenshots of each page in the following slides, but wanted to list them here so you are aware that this will be the longest portion of the online registration application.



Student Demographics

First Name *	New
Middle Name *	
No Middle Name	
Last Name *	Student
Suffix	
Gender *	~
Birth Date *	MM/DD/YYYY
What is the student's grade level for the 20 20, school year? Note that 00 is Kindergarten. *	~
Primary Address *	~
Home Address Mail A	Address

The following information will be used to generate additional funding for the Long Beach Unified School District (i.e., Title III Immigrant Education Program funding). If LBUSD receives this funding, your child and you as the parent/guardian may be eligible to receive FREE supplemental educational and support services funded by the Title III Immigrant Education Program.

These services may include: • After-School Tutoring • Saturday School • Summer School • Family Training • Parent/Family Outreach

The District does not collect information about citizenship, immigration status, or use this information to discriminate against children or families or bar them from enrolling in or attending school.

Birth City	
Birth Country *	~
Date of First US School (K-12) *	MM/DD/YYYY
	Previous Save And Continue >



Student Contact Info.

This section is for the student's information, **not the parent's**. Note that you may have to scroll to the right to see all of the fields.

If the student does not have their own cell phone, check the "Student has no phone numbers" box. If the student does not have an email address, leave that field blank.

When done, select "Save And Continue" to move onto the next page.

DEM	OGR	APHIC	S				1	3%					
Con	Contact Information: Sample Student												
0	nstru	uctions	i										
Plea	se enter ber or e	the studer mail addres	nt's phone numb ss, check the bo	er and/or indicatin	email add 1g the info	ress. This rmation is r	should I not avail	be separate fr able. Do not e	om the parent nter in guardi	information. If an number or e	the student of mail address	does not have s.	a phone
(n)s	tudent	has no ph	one numbers.										
Pho	ne Nu	mbers											
×	Line	Primary	Туре	1	Phone			Extension	Not Listed	Phone Com	munication	Text Comm	unication
	1			~* (()	-	*			Yes	~	No	~
+ /	Add Nev	v											
Stud	ent Per	sonal Ema	ail										
						< Previou		e And Continu	Je >				



Student Residence

Indicate the student's current living situation. When done, select "Save And Continue" to move onto the next page.

Presently, where is the student li	ving?	
Residence Type*	PERMANENT HOUSING	~
The student lives with:		
Family Code	Two adult family	~
	Previous Save And Continue	D

Student Language and Ethnicity/Race Info.

Indicate the student's language experience. When done, select "Save And Continue" to move onto the next page.

Indicate the student's ethnicity and race. When done, select "Save And Continue" to move onto the next page.

Which language did your child learn w	/hen he/she first began to ta	k?	
Language First Learn*	Spanish	~	
Which language does your child most	frequently speak at home?		
Spoken by Student at Home*	English	~	
Which language do you (the parents of	or guardians) most frequently	use when speaking with your child?	
Spoken to Student at Home*	English	~	
Which language is most often spoken	by adults in the home? (Par	ents, guardians, grandparents, or any ot	her adults)
Spoken by Adults at Home*	Spanish	~	
	< Previous	Save And Continue	

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Ethnicity: Sample Student

Select One *

Hispanic

Provide the following information about the student's race:

African American	Vhite
Filipino	American Indian or Alaska Native
Asian - Chinese	Asian - Japanese
Asian - Korean	Asian - Vietnamese
Asian - Indian	Asian - Laotian
Asian - Cambodian	Asian - Hmong
Asian - Other	Pacific Islander - Native Hawaiian
Pacific Islander - Guamanian	Pacific Islander - Samoan
Pacific Islander - Tahitian	Pacific Islander - Other
< Pr	reviors Save And Continue >



Student Health Info.

On this page, you can provide the student's Physician and Dentist information. It is optional so you can skip it if you'd like.

When done, select "Save And Continue" to move onto the next page.

nealth mormation	
Physician	
Name	Doctor David
Phone Number	(555) 555 - 5555
Extension	
Preferred Hospital	Sample Hospital
Dentist	
Name	Dentist Donna
Phone Number	(777) 777 - 7777
Extension	
Office	Sample Dentist
	Previous Save And Continue

Permanent Student Health History (1 of 3)

Insurance and Health Conditions

Indicating the student's insurance plan is optional, but the health conditions are mandatory fields. Fill them out accordingly.

Permanent Student Health History: Sample Student Instructions PERMANENT STUDENT HEALTH HISTORY The following information is to be treated as confidential and will assist the School Nurse with the student's program. Notes from physicans should be taken to the School Nurse. If the student is taking medications for the following conditions, please indicate it in the Medications section Name of health insurance/plan: Medi-Cal? 1. Allergies/Hay Fever * V 2. Allergy to bee/insect sting * \mathbf{v} 3. Asthma \sim 4. Childhood diseases: * Chicken Pox * \sim * Scarlet Fever * V * Meningitis * V 5. Colds/frequent sore throats 6. Diabetes * \sim * Tests blood * \sim * Takes insulin ³ \sim

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Permanent Student Health History (2 of 3)

12. Surgery *

* Surgery Date

* Reason for Surgery 13. Tuberculosis *

* Tuberculosis in Family *

* Wears contact lenses

14. Wears glasses

Health Conditions Continued and Physical Limitations

Fill out the mandatory fields accordingly. Dates will not be required if condition/limitation is not applicable to the student.

7. Epilepsy/convulsions/seizures	*	~
Date of last seizure	MM/DD/YYYY	
8. Ear Infections *		~
* Hearing loss *		~
* Wears hearing aids *		~
9. Heart disease *		~
or physical limitations, enter "Yes"	and please indicate in #16, Special concerns.	
* Physical limitations *		~
10. Speech problems *		~
11. Skull fracture or concussion *		~
* Concussion Date		

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MM/DD/YYYY

MM/DD/YYYY

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Permanent Student Health History (3 of 3)

Medications

If a student is taking any medications, they should be listed here by selecting either of the "add new" buttons under the school or home medication sections.

If a student does not take any medication, then select the "Student has no medication" box.

If you had previously said "yes" to physical limitations (between 9 & 10), then indicate any special concerns in #16. If not, leave blank.

When done, select "Save And Continue" to move onto the next page.

· · ·			
5. Takes medication(s) daily *		~	
5. Special concerns:			
Student has no medication			
R -			
List any	y medications that need to be	taken by the student at school	
Medication Name	Dose	Frequency	Reason
Add New School Medication			
Add New School Medication	le additional comments about	the medications to be taken at s	school
Add New School Medication	le additional comments about	the medications to be taken at s	school
Add New School Medication	le additional comments about	the medications to be taken at s	school
Add New School Medication	le additional comments about	the medications to be taken at s	ichool
Add New School Medication	le additional comments about List any medications taken b	the medications to be taken at s y the student at home	school
Add New School Medication any medications not listed above or provid Medication Name	le additional comments about List any medications taken b Dose	the medications to be taken at s y the student at home Frequency	Reason
Add New School Medication t any medications not listed above or provid Medication Name Add New Home Medication	le additional comments about List any medications taken b Dose	the medications to be taken at s y the student at home Frequency	Reason
Add New School Medication at any medications not listed above or provid Medication Name Add New Home Medication at any medications not listed above or provid	le additional comments about List any medications taken b Dose	the medications to be taken at s y the student at home Frequency	Reason

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Student Immunizations

Please add the full record of your student's immunizations here.

When done, select "Save And Continue" to move onto the next page.

Immunization: Sample Student

Instructions

To attend school, your child's Immunization Record must show the date for each required shot above. If you do not have an Immunization Record, or your child has not received all required shots, call your doctor now for an appointment. If a licensed physician determines a vaccine should not be given to your child because of medical reasons, submit a written statement from the physician for a medical exemption for the missing shot(s), including the duration of the medical exemption. A personal beliefs exemption is no longer an option for entry into school; however, a valid personal beliefs exemption filed with a school before January 1, 2016 is valid until entry into the next grade span (7th through 12th grade). Valid personal beliefs exemptions may be transferred between schools in California. For complete details, visit ShotsforSchool.org. You must also submit an immunization record for all required shots not exempted.

	Dose 1	1	Dose 2		Dose 3		Dose 4		Dose 5		Dose 6
Polio (OPV or IPV)	MM/DD/YYYY	m	MM/DD/YYYY	Ħ	MM/DD/YYYY		MM/DD/YYYY		MM/DD/YYYY		
DTP/DTaP/DT/Td	MM/DD/YYYY	#	MM/DD/YYYY		MM/DD/YYYY		MM/DD/YYYY		MM/DD/YYYY	Ħ	MM/DD/Y
MMR	MM/DD/YYYY		MM/DD/YYYY	#	MM/DD/YYYY	#					
HIB Meningitis	MM/DD/YYYY		MM/DD/YYYY	#	MM/DD/YYYY	#	MM/DD/YYYY		MM/DD/YYYY	Ħ	
Hepatitis B	MM/DD/YYYY	m	MM/DD/YYYY	韴	MM/DD/YYYY	Ħ	MM/DD/YYYY				
Varicella	MM/DD/YYYY		MM/DD/YYYY	#							
Tdap Booster	MM/DD/YYYY		MM/DD/YYYY	Ħ							
Hepatitis A	MM/DD/YYYY	#	MM/DD/YYYY	#							
Meningococcal	MM/DD/YYYY	m									
COVID (comment type vaccine)	MM/DD/YYYY		MM/DD/YYYY		MM/DD/YYYY						
			•	(Previo	us Save And Cor	tinue >					



Previous School Attended

In this section, add the previous schools the student has attended. Note that you may have to scroll to the right to see all of the fields.

When done, select "Save And Continue" to move onto the next page.

Previous Schools Attended: Sample Student

Instructions

Please provide the most recent schools attended. For Kindergarten registrations, please include Preschool enrollments. Notify the school site of any additional schools attended that do not fit in the space provided.

School Name	City	State	Country	Grade	School Year Attended	Phon	e	
		~	~	~	~	()]
		~	~	~	~	()	÷
		~	~	~	~	()]
		~	~	~	~	())





Special Services

This section asks about special services for the student. If your student has ever been tested for or participated in any special services/programs, when you indicate that here, it will ask more questions. Answer the questions that apply to your student and when done, select "Save And Continue" to move onto the next page.





Parent/Guardian Relationships

Indicate the relationship for each parent/guardian using the drop down lists and check the appropriate boxes for each person listed.

The "PVUE" checkbox is to only be used with Foster parents who do not have Educational Rights.

Indicate if there are any court orders you wish to notify the school about regarding custody of the student(s).

When done, select "Save And Continue" to move onto the next page.

Parent/Guardian Relationships: Sample Student

Relationship	First Name	Last Name	Gender	Lives With	Contact Allowed	Ed Rights	Has Custody	PVUE (View Only Access)	Communications Allowed	Release To	Fina Res
\bigcirc			Female	~		1	~				
- OR-			Male								

Has Custody: Indicates the parent/guardian has legal custody of the student.

ParentVUE: Indicates the parent/guardian has access to ParentVUE for the student.

Mailings Allowed: Indicates the parent/guardian may receive mailings regarding the student.

Release To: Indicates the school may release the student to the parent/guardian

Financial Resp.: Indicates the parent/guardian is financially responsible for the student.

Are there any court orders you wish to	
notify the school	
about regarding	
legal custody,	
physical custody, or	
restricted contact	
with the school or	
child?	

Yrevious
 Save And Continue
 S



Emergency Contact Relationships

Indicate the relationship for each emergency contact you had previously submitted using the drop down lists and check the "Release To" box for anyone you would like to be allowed to pick up your student from school.

Note that if you select the "No Relationship" box for any of the emergency contacts listed, it will remove the "Release To" box and not allow them to pick up the student from school. But, if there is a relationship and you do not want them to be allowed to pick up, you can still indicate a relationship and leave the "Release To" box unchecked.

When done, select "Save And Continue" to move onto the next page.

Emergency Contact Relationships: Sample Student

Instructions

Indicate the relationship each emergency contact has with the student. Later, you will be asked to indicate your call order preference for all contacts.

Associate at least 2 contacts and at most 10.





Emergency Contact Order

Put all of the emergency contacts in order by dragging and dropping.

When done, select "Save And Continue" to move onto the next page.

Emergency Contact Order: Sample Student

Instructions
Drag and drop the contacts below in the order in which they should be contacted in the event of an emergency:
 (Mother) (Father) John Doe (Friend) Jane Doe (Relative)



School Password

If you are applying with a home address that is outside of LBUSD district boundaries, you will need to enter the password you received from the District Office on this screen.

If this applies to you, enter the password then select "Save And Continue" to move onto the next page.

Password: New Student

The address entered at the beginning of this application is not within LBUSD district boundaries. If you believe this is an error, navigate back to the Family tab and type your address slowly into the search box.

If you live outside of LBUSD boundaries and were approved to attend a school in the district, enter the password code that was provided to you from the District Office.

Questions? Contact the Elementary Office at 562-997-8247, Middle School Office at 562-997-8100 or High School Office at 562997-8115.

Please enter the password you were given to register.



School Selection

This will be based on the home address and grade level that was entered at the beginning of the application and it will be the school of residence. All students must be registered at their school of residence first.

For incoming 6th or 9th graders - Once you receive the confirmation email that the enrollment has been processed, every parent <u>must</u> submit a separate Choice application in ParentVUE to select your school choices.

For all other parents (Grades TK-4, 6-7, 9-11) -School of Choice is optional. After you receive the enrollment confirmation email, complete the School of Choice Application in ParentVUE if you desire for your child to attend a school other than their school of residence.

For additional info visit https://www.lbschools.net/Departments/School_Choice

School Selection: Sample Student

Information

Based on the home address entered, you live within the attendance boundary of Stephens Middle School

Home	e Address: ONG BEACH, CA 90810		
1.	School Selection *		
	Stephens Middle School	~	
	1830 W Columbia, LONG BEACH, CA 90810		



Policies

Review our policies and select what you would prefer for each of them.

When done, select "Save And Continue" to move onto the next page.

Release Information: New Student

Instructions

Do

par

The annual parent notifications booklet is available for viewing on our website at LBUSD Parent Guidelines. It contains important information for you to review.

The annual parent notifications booklet, "Guidelines for Parents and Students," is available for viewing on our website at bischools.net under Families > Guidelines for Parents and Students (or click here to view). This booklet contains important information, and we encourage you to become familiar with its contents. If needed, you may request a hard coupy of this booklet ary our student's school.

I acknowledge receipt of this notice regarding the availability of the Guidelines for Parents and Students

School districts are required to release student directory information for military recruitment purposes unless parents request that Student Directory information be withheid. Information about your students that can be released to military, as well as other agencies listed below, includes name, address, terdiadare, dates, graduation, high school major, participation in officially incorporated and these address, the address, terdiadare, dates, graduation, high school major, participation in officially incorporated activities and soports, for an attitute term-weight and height, diploma and awards relevied. Agencies receive only the information directly related to their request. For example, a scholarship sponsor would receive dates of attendance, hornes and awards information but not weight and height.

Agencies requesting information: Governmental: The Armed Services, Probation Department, Department of Children's Services, law enforcement in the ocurse of official duels, Social Security, Veterian's Administration, Reicht officials, Schoch-eideater PT, VPD, Schoch Intraster PT, Services Law enforcement in the source of official duels, Social Security, Veterian's Administration, Reicht officials, Schoch-eideater PT, VPD, Schoch Intraster PT, Services Law enforcement of the source of motions Potential or current employers. Plot Security, and edgesites Schoch-eideater PT, Veteria Marchanistration, Services and Services, Proteination and Services, International and Services (mitigation), and edgesites as a home there you callude its foreignes with the Service and exervices (mitigation) or of non all agencies. Directory information regarding apualting identified as a homesies child or youth shall not be released unless a parent, or pupil given parental rights, has provided withen consent that directory findmation may be transiends.

Do you consent to the release of your student's information to the military? *	~
Do you consent to the release of your student's directory Information? *	\sim

I hereby understand and acknowledge my child's participation in the LBUSD media publications (including but not limited to school/district videos, photos for display and/or other school/district publications). If you consent to this or would prefer to opt out of photo/media publications, please indicate below.

you consent to your student's	×	
ticipation in photo/media? *	•	

The California Healthy School Act of 2000 is a right-to-know law that allows parents/guardians/staff to request to be notified when pesticides are applied at public schools and child care centers. The law encourages the adoption of effective, lower risk pest management practices, also known as Integrated Pest Management (IPM). If you wish to be notified when pesticides are applied, please indicate below. This can be updated arg/mine through PVLE.

Do you wish to be notified when	V	
pesticides are applied? *		

The school district, in cooperation with the California Departments of Health Care Services and Education, participates in a program that allow He district to be rembursed with feedma Medical distants in seatch health services provided to enrolled Medi-Cal attudents at school. In accordance with state and federal rules and guidelines, we are notifying you that some information may be released from your student's records to our reindrusment recovery vendor, Prangel Mediath Care Services (LC) and the Department of Health Care Services (HCS) for catinging purposes only (and your calific Medica) faultents may be accessed). All Information that is a thater's encrypted and transmitted securely to both our vendor and to DHCS. The education necords that may be shared as a result of our participation in this program include:

Do you consent to bill Medi-Cal if any eligible services are provided? *	~
chnology	

pes your student have access to	V	
e Internet at home? *	•	

Board Policy 6142.1 states that high school students will have anonymous access to free condoms. If you do or do not want your student to receive written or verba instructions on the proper use of condoms, please indicate below. A response to this question is optional.

Do you wish to opt your student	×
out of receiving condom	
information?	





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Policies (Continued)

If you are filling out the application for a 12th grade student (both questions) or 6th-11th grade student (second question only), you will see some additional policy questions. Review our policies and select what you would prefer for each of them.

When done, select "Save And Continue" to move onto the next page.

Cal Grant Release Information: New Student

Educational code (EC 69432.96, ch.679) mandates that all public high schools must electronically upload a GPA for all 12th-grade students to the California Student Aid Commission (CSAC). The benefit of having all GPAs uploaded to the California Student Aid Commission is that when you complete your Free Application for Federal Student Aid (FAFSA) by the deadline, your student will be considered for all Cal Grants and the Middle-Class Scholarship. Please indicate below if you consent to including your student's GPA in the upload to CSAC.

Do you consent to including your student's GPA in the upload to CSAC? *

CCGI Release Information: New Student

Dear Parents/Guardians, Long Beach Unified School District has become a California College Guidance Initiative (CCGI) partner district, which gives your student access to valuable tools and resources to support his/her college and career planning that is only provided when transcript data is uploaded from the district's Student Information System. CCGI is a state-wide, equity-focused non-profit that manages the state of California's college and career planning platform, CaliforniaColleges.edu. In order to provide these valuable tools and resources to students, LBUSD will share student transcript data in accordance with all state and federal student privacy laws. Through this partnership, your student can:

Save And Continue

1. Regularly use the CSU and UC Eligibility tools to view progress towards meeting the A-G course requirements (eligibility for 4-year universities), and quickly communicate with his/her counselor.

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2. Apply to any CSU campus and his/her pre-verified courses automatically migrate to CalState.edu/Apply, reducing time spent on the application and decrease errors caused by discrepancies

3. Launch the CCC Apply application to CA community colleges.

4. Launch FAFSA. Parents/guardians can also create accounts to gain view-only access to students' progress, just as they do with their Parent/Student Vue accounts.

Please indicate below if you consent to including your student's transcript data in the CCGI partnership, in accordance with all state and federal student privacy laws.

Do you consent to including your student's transcript in the CCGI partnership? *

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 Save And Continue



Optional Student Insurance

This page provides information on student insurance that is completely optional. If you are interested, take note of the website listed at the top and the contact information listed at the bottom of this page.

When done, select "Save And Continue" to move onto the next page.

Optional Student Insurance: Sample Student

Instructions

Parent notifications booklet, "Guidelines for Parents and Students," is available for viewing on our website at http://www.lbschools.net/Departments/Parent_U/guidelines.cfm. It contains important information for you to review.

BUSINESS DEPARTMENT- Financial Services

Risk Management Branch 1515 Hughes Way, Long Beach, California 90810-1839

(562) 997-8193

Student Injuries and Insurance Offered by Myers-Stevens & Toohey

2023-2024 School Year

Dear Parent/Legal Guardian:

The safety of our students is of critical importance to all of us and we want to protect them from injury. Evens on, accidents do happen (at school and elsewhere) and required medical care can be expensive. Please know that your school does not assume responsibility for such costs but does offer you access to several student accident insurance plans for voluntary purchase. Details and enrollment information can be found at the NST website www.myers-stevens.com

Options are available to cover your child 24/7, anywhere in the world or you can limit coverage to school-related injuries only. The plans <u>do not</u> restrict your choice of doctors or hospitals. However, you'll also have access to an extensive network of providers with discounted fees. Seeking care through contracted providers may further reduce your out-of-pocket costs, particularly frou child needs surgery or hospitalization.

Also offered is the pay-as-you-go Student Accident & Sickness Plan which <u>covers sickness</u> as well as injury, in and out of school. The Dental Accident plan can be of particular value with younger students as final treatment to injured teeth often needs to be deferred until after they mature.

Common emergency benefits – Regardless of the benefit level selected, all of the accident medical plans and the Student Accident & Sickness Plan will cover eligible charges for Ambulance, Emergency Room and Emergency Room Physician at 100% of Usual, Customary and Reasonable charges (UCR) up to plan limits.

Enhanced benefits for qualified concussions – If an insured student suffers a concussion while participating in any covered activity and is consequently removed from Jish from higher interscholastic sport per the school's format concussion protocols, then any deductible or inside limit features of the plan are waived and eligible charges for the evaluation and iterativent of the concussion are paid at 100% of UCR subject to remaining policy terms and conditions.

Interscholastic Sports – Please know that all plans offered (other than the Dental Accident Plan) may be used to comply with applicable state and local insurance requirements for participation in interscholastic sports (coverage for high school tackle football is offered on a stand-alone basis).

You are strongly encouraged to carefully review the information provided. If your child already has health coverage, the student insurance plans offered can also be used to expand your choice of providers and help cover the high deductibles and 30% to 40% cost sharing obligations imposed by many health plans today.

While your child is eligible to enroll at any time, one-time-pay rates for the accident modical plans and Dental Accident Plan are the same regardless of enrollment date. As such, you are encouraged to consider enrollment now in order to include coverage for this summer and the full 2023-2024 School Year. Once processing is completed, an ID card verifying coverage will be malied home to you.

If you have any questions concerning the coverages available or need help with enrollment, please call Myers-Stevens & Toohey at (800) 827-4695. Bilingual representatives are available for parents who need assistance in Spanish. Again, the website is www.myers-stevens.com

Chief Business & Financial Officer

Financial Services Officer





Return to Student Screen

The next screen will land back on the original "Students Registering" screen. Verify that the new student displays as "Complete".

- If additional siblings need to be enrolled, click "Edit Student Info" for returning students or "Add New Student" for a new student never enrolled before in LBUSD.
- If no other students need to be enrolled, click "Save And Continue".

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			F	irst Iame	Middle Name	Last Name	Gender	Grade	Status /
💉 Edit student info	✓ Click here to excl	ude student							
× Remove from application		Sample			Student	Male	08	Complete	
+ Add New Student									
Student List									
First Nam	e Middle Name	Last Name	Gender	Grade	Notes				
First Nam	e Middle Name	Last Name	Gender Male	Grade	Notes Student ali	eady has an	active enro	llment for	this year
First Nam	e Middle Name	Last Name	Gender Male	Grade	Notes Student al	ready has an	active enro	llment for	this year

Step 14: Documents

Upload all of the required documents for your student.

Note: Even if documents are uploaded, the school will still need to see the original documents at a later date.





Step 14: Documents Continued

The "Download All Documents" button must be clicked to move on. This will download the answers to your student's Home Language Survey that was answered earlier in the application.

After downloading, select "Save And Continue" to move onto the next page.





Step 15: Review and Submit

Review all information that was submitted in the application and make any necessary changes.

REVIEW/SUBMIT

Review allows you to confirm all data entered during the Registration process to ensure accuracy. When complete, press Submit below:

Status	Student	Grade Level	School Selection
Ready To Submit	Sample Student	08	1. Stephens Middle School
	C Previous	Review	



When done reviewing and making changes (if applicable), scroll to the bottom of the page to select the "I have reviewed..." box and then select "Submit".

Bownload All Documents

I have reviewed all registration data and verified that it is correct. I understand that I will still need to contact my child's school site to schedule a time to deliver hard copies of my documents even if they were uploaded here) in order to fully complete the registration process.

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Step 15: Review and Submit Continued

After selecting "Submit", a pop-up will appear. Select "OK" to confirm registration.



Congratulations, you're done!

Registration

Status

The status of your registration(s) that are in progress can be found on the status page

How to Check the Status of Your Application

Check the status of the application at any time by logging back into your account.

The status will display as "Waiting" until the school processes the application.

tus of Re	cent Registration	tion Activity		
Paviaw Su	hmittad: 0/21/2020	12.57 PM		
Status	Last Name	First Name	Grade	School Name
🔀 Waitir	ng Smith	Sally	05	MacArthur Elementary: Waiting
You w	ill be entering informat	ion for Online	Registration	
				Begin New Registration >

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Once the application is processed, the status will change to "Accepted" and the student should report to school on the first day.





Questions?

If you still have additional questions please contact your school of residence.

Additional Contacts:

For Technical Support for ParentVUE - Email Only	ParentSupport@lbschools.net
Elementary and K-8 Schools - District Office	562-997-8247
Middle Schools - District Office	562-997-8100
High Schools - District Office	562-997-8115
School of Choice Office - For Incoming 6th and 9th Graders	562-997-8306