

UPK Registration- Step 1

To submit this form, you must complete five tabs. You cannot navigate to another tab without first submitting the current one. Additionally, every section or question marked with an asterisk must be filled out in order to proceed with the submission.

Iroquois CSD Online Student Registration

Household Information

Guardian Contacts

Emergency Contacts

Student Information

Account Information

Household Information

Kindergarten Registration:

Incoming kindergarteners for the 2024-2025 school year must be born on or before 12/01/2019.

UPK Registration:

Incoming UPK students for the 2024-25 school year, students must be 4 years old (no less than 4 years old and not yet 5 years old) on December 1, 2024.

All Grade Level Registrations:

After completing this online application, you will receive an email with login credentials for Operoo. This is where the remaining registration documentation will be uploaded (birth certificates, proof of residency, health screenings, etc...)

Registration Date *

Registration Date

Family Last Name * ⓘ

Initial Registration Instructions

Please note there are 5 sections to this form. You will need to fill out all sections before being able to submit this form.

- Household Information

- Guardian Contacts

- Emergency Contacts

- Student Information

- Account Information

Please fill out all information marked with a red asterisk (*).

Primary Household Language *

Please start typing in the search box to find your household language.

☐ Check if you require Translation Services.

Please type in the first few letters of your street and city to refine the selections available in the drop-down listing. If your street/city does not appear, please select "Other".

Household Address *

Number

Number

Street

Street

Apartment

Apartment

Condo/Community

Condo/Community

City

City

State/Province

State/Province

Zip/Postal

Please type the name of your street / city to search. If your street/ city is not listed below, please select "Other".

Begin with today's date and your family last name.

Input your household address. Begin typing the first few letters to refine the drop-down listings.

Select your primary household language, if it does not appear begin typing the language. Select the box if require translation services.

Starting with the area code, insert your primary phone number.

Primary Household Phone *

Home Phone Type

() - -

☐ Unlisted

Household Mailing Address ⓘ

☐ Same As Household Physical Address

Number

Number

Street

Street

Apartment

Apartment

Condo/Community

Condo/Community

PO Box

PO Box

City

City

State/Province

State/Province

Zip/Postal

- -

If your household mailing address is the same as the physical address you just inserted, select the box. If not, please insert your mailing address.

Additional Registration Documents

After submitting your initial registration form, you will be emailed instructions with steps on how to upload additional forms from Operoo. These include the following:

To complete the initial registration:

- A copy of the Birth Certificate;
- Two (2) Proofs of Residency; and
- Any custodial/guardianship agreement.

To be submitted prior to the first day of school:

- A physical examination done by a NYS physician (within one year of start date); and
- Official Proof of Immunizations;

Proof of Residency:

Acceptable proofs of residency include:

- Utility bill specific to new address
- Lease/Rental Agreement
- Mortgage Statement
- Contract of Sale with closing date and signatures
- Photo ID (Driver's License) - *recommended*

Custodial Agreement:

In cases of Divorce/Separation, you must upload a copy of the Family Court issued Guardianship/Custody Document. No other document will be accepted.

****You will need to upload these in Step 2.**

Iroquois CSD Online Student Registration

Household Information

Guardian Contacts

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Account Information

Guardian Contacts 1.

Please enter at least one guardian below.
You will be asked to define the relationship to each child on the Student Information tab.
To add more than one guardian, click "Add Additional Contact".

Contact Last Name *

Contact Last Name

Phone *

[Add Phone](#)

Phone Type

() - -

☐ Unlisted

Contact First Name *

Contact First Name

Contact Email

[Add Email](#)

Email Type

john.smith@e

☐ Primary

Contact Gender

In order to make sure we have accurate information on who lives in the household, check the box below if this contact lives in the same household as the student.
If this contact does NOT reside in the same household, enter in the contacts address in the contact mailing address.

☐ Check if this contact resides in the same household as the student(s) being registered.

Contact Mailing Address

☐ Same As Household Physical Address

Number

Street

Apartment

Number

Street

Apartment

Condo/Community

Condo/Community

PO Box

PO Box

City

State/Province

Zip/Postal

City

State/Province

- -

Click "Add Additional Contact" if you would like to add additional guardians.

[Add Additional Contact](#)

[Previous](#)

[Next](#)

**A primary email is required for at least one guardian.

To enter another guardian, click here and enter their information.

Enter the contact information for at least one guardian.

Please select the box if this guardian lives in the same house as the student you are registering. If they live at the same address you have already inserted check the box, if not insert the guardians mailing address.

****Emergency contacts should *not* be one of the guardians you already listed. Please list at least one contact that is not a parent or guardian. You will be asked to define the relationship to the child for each contact in the next tab.**

Iroquois CSD Online Student Registration

Household Information Guardian Contacts **Emergency Contacts** Student Information Account Information

Emergency Contacts 1.

Please enter at least one emergency contact, that is **NOT** a parent or guardian, below.
You will be asked to define the relationship to each child on the next tab.
To add more than one emergency contact, click "Add Additional Contact".

Contact Last Name *

Contact Last Name

Phone *

Phone Type () - - **Add Phone**

☐ Unlisted

Contact First Name *

Contact First Name

Contact Email

Email Type john.smith@example.com **Add Email**

☐ Primary

Contact Gender

☐ Check if this contact resides in the same household as the student(s) being registered.

Contact Mailing Address

☐ Same As Household Physical Address

Number **Street** **Apartment**

Number Street Apartment

Condo/Community

Condo/Community

PO Box

PO Box

City **State/Province** **Zip/Postal**

City State/Province - -

Add Additional Contact

Previous **Next**

Enter the contact information for at least one emergency contact.

Please select the box if this contact lives in the same house as the student you are registering. If they live at the same address you have already inserted check the box, if not insert the contacts mailing address.

****A primary email is required for at least one emergency contact.**

To enter another emergency contact, click here and enter their information.

Enter the information for the student you are registering. If you are registering multiple students you will click “Add Additional Student” before you select “Next”.

Iroquois CSD Online Student Registration

Household Information

Guardian Contacts

Emergency Contacts

Student Information

Account Information

Student Information 1.

Please enter student name exactly as it appears on his/her/their birth certificate. If you are registering more than one student, click "Add Additional Student". All fields marked with a red asterisk (*) are required.

Student First Name *

Student First Name

Student Middle Name

Student Middle Name

Student Last Name *

Student Last Name

Student's Gender *

Student's Gender

Identified Gender

Identified Gender

Pronoun

Pronoun

Student's Date Of Birth *

Student's Date Of Birth

City Of Birth

City Of Birth

Which grade level is this student being registered for? *

Which grade level is this student being registered for?

Previous Iroquois CSD Students

Previous Iroquois CSD Students

Student Race *

☐ Native Hawaiian/Other Pacific Islander

☐ Asian

☐ American Indian/Alaska Native

☐ Black/African American

☐ White

☐ Optional: If the Student is of Hispanic Origin, check here:

Student's Country Of Birth

Student's Country Of Birth

Student's Dominant Language *

Student's Dominant Language

Please start typing in the search box to find your household language (example: English)

The Migrant Education Program (MEP) is authorized by Title I, Part C of the Elementary and Secondary Education Act (ESEA). The MEP provides a variety of educational services to families who work in agriculture, regardless of their nationality or legal status. This program is free of charge to all eligible families and may include tutoring, free school lunch eligibility, educational field trips, summer programs, parent involvement activities, emergency needs and referrals to other services as needed.

Please answer the following question as it pertains to any guardians in the household only.

Has anyone in your family worked or looked for work at the following occupations during the past 3 years? * Any agricultural, farm, or fishing work. * Work related to logging, harvesting, or initial processing of trees. * Work at a food processing plant.

Enter the student's information as it appears on their birth certificate.

Please identify the students race and select the box if they are of Hispanic origin.

Select the students dominant language.

Use the dropdown to select “yes” or “no”.

****Only one person, a guardian OR emergency contact, can be listed as contact priority number 1. Priority numbers can **not** be used more than once.**

Use the dropdown to select a guardian you have previously identified. Specify their relationship to the student and their contact priority.

Guardian Contact *

Guardian Contact

Guardian Contact

Contact Priority: 0

Relationship: Relationship

Correspondence: Correspondence

Custodial Parent: Custodial Parent

Child Pickup: Child Pickup

Guardian Alert

Guardian Alert

Add Guardian Contact

You need to specify the relationship between the student and **each** guardian and emergency contact you have entered and whether or not that person can pickup the student from school.

Use the dropdown to select an emergency contact you have previously identified. Specify their relationship to the student and their contact priority.

Emergency Contact *

Emergency Contact

Emergency Contact

Contact Priority: 0

Relationship: Relationship

Child Pickup: Child Pickup

Add Emergency Contact

Add Additional Student

To register another student, click here and enter their information. You will need to specify the relationship between the student and each guardian and emergency contact you have entered for this student as well.

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Iroquois CSD Online Student Registration

[Household Information](#)[Guardian Contacts](#)[Emergency Contacts](#)[Student Information](#)[Account Information](#)

Account Information

Thank you for completing the first step to register your child(ren) into the Iroquois Central School District! After submitting this form, you should receive an introductory email from Operoo with the next steps in your registration process.

The District Board of Education will not admit non-resident students to attend the District's schools. I understand that should the above information prove false, as parent/guardian, I am liable for tuition payment to the District and that my child(ren) will be immediately dismissed from Iroquois Central School District. I also understand that if my residency should change, I will immediately notify the iroquois Central School District.

Agreement *

I agree and understand that my digital signatures collected throughout the registration process are the legal equivalent of my manual/handwritten signature and I consent to be legally bound to these agreements.

☐ I Agree *

☐ Agreement *

Submit Date *

Submit Date

Contact *

Contact

Please choose one of the guardians from the application as the contact for this application form.

Signature *

Signature

Type in your name as your digital signature.

[← Previous](#)[Submit](#)

Click submit to complete Step 1 of the registration process.

Please check the box to confirm your agreement, acknowledging that this signature holds the same legal validity as a handwritten signature.

Type your name as your digital signature.