



FRED W. HOSLER MIDDLE SCHOOL

11300 SPRUCE STREET LYNWOOD, CA 90262

TEL 310.603.1447 – FAX 310.764.4124



DATA CONFIRMATION PROCESS

Please follow the steps below to complete the data confirmation and authorization process required by the Fred W. Hosler Middle School before your student's attends their orientation date. The District requires a Student Data Confirmation review every summer, but you can also update information at any time during the school year. The annual Student Data Confirmation process must be completed for each of your students. Accurate data helps to ensure your student's safety in the event of an emergency.

Step 1: Parent Portal Web Address

Go to <https://lynwoodusd.asp.aeries.net/>

Lynwood Unified School District

English

Aeries
Student Information System

Email

NEXT

[Forgot Password?](#) [Create New Account](#)

Get the Aeries Mobile Portal App!

Download on the App Store

GET IT ON Google Play

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Step 2: Login or Create New Account

If you have already created an email and password for this system, please login. If not, click on Create New Account.

When creating a new account, you will be asked to enter a valid email address twice, and set a password twice. A verification email will be sent to this email address. If you do not receive a verification email, please check your SPAM or Junk mail folder. The verification email will contain a link that validates your email address into the Parent Portal. Once verified, login to the portal with your new account and continue with Step 3.

When creating a new account, select Parent. Only parent accounts can view student data and/or complete the data confirmation process.

Please do not allow your student to create a Student account. The portal will not contain any useful information for them and it creates a problem for other systems at this time.



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Step 3: Add Students to your Portal Account

You will be asked to supply information in order to add your new student to your Parent Portal account. If you do not have the information, please request it [here](#). Please enter the Student ID, Phone Number and the Verification Code when prompted.

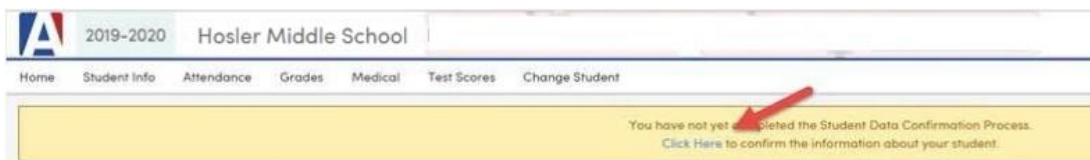
Note: Repeat this step for each new student you have within the District by clicking on **Change Student** in the upper left corner, then **Add a New Student**.

If your student is transferring to a different LUSD school, you will not need to re-add them.

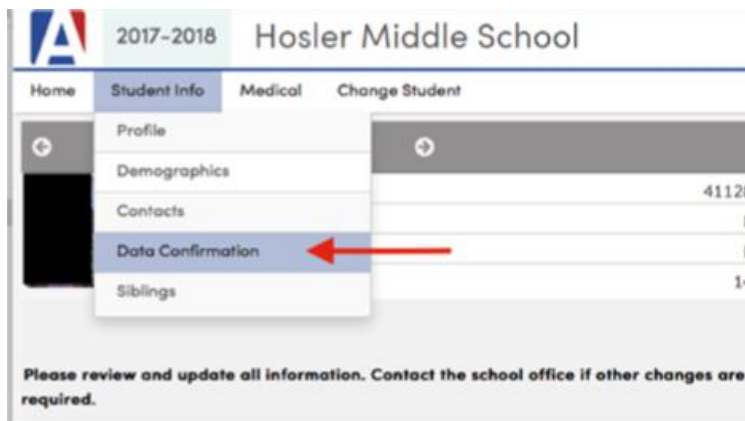
Step 4: Student Data Confirmation

Once verification is completed, you will be on the Home screen.

If you have multiple children in the District, you will need to do this process for each of your children



Please go under **Student Info** and select [Data Confirmation](#). This is the only place you can enter or change data for your student.



Step 5: Family Information

The Data Confirmation screen will look as follows and must take place in sequence, beginning with the **Family Information** tab. Please indicate whether at least on parent/guardian of the student is active in the US Armed Forces.

Also, please select one of the housing options before clicking "Confirm and Continue."



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1 Family Information ←

Student ✓
 Contacts ✓
 Medical History ✓
 Documents 5
 Authorizations ✓
 Final Data Confirmation 7

Confirm and Continue

Please select whether or not at least one parent/guardian of this student is active in the United States Armed Forces:

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.

Please select 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.

Step 6: Student

Verify phone numbers provided and correct as necessary. Changes to other data for your student must be requested in the school office (for example, residence address changes).

Please review and update all information. Contact the school office if other changes are required.

Last Confirmed: 8/9/2016 10:36:49 AM
 Please review your student's information and contact the school office if changes are required.

Family Information ✓
Student ←
 Contacts ✓
 Medical History ✓
 Documents 5
 Authorizations ✓
 Final Data Confirmation 7

Confirm and Continue ←

Student Demographics		Notes
Primary Phone	<input type="text"/>	
Father's Work	<input type="text"/>	
Mother's Work	<input type="text"/>	
Change		

Series Version 8.17.7.21

Step 7: Contacts and Emergency Contacts

Click on the **Contacts** tab on the left. Verify the parent information and correct as necessary.



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The email address for the contact you are logged in as, will show as locked. To change your Parent Portal email account or the password, click on **Options** in the upper right corner.

IMPORTANT – this is also where you add **Emergency Contacts** for your student. Click **ADD**. Complete the information for the new contact and select Emergency contact from the pull down.

Parents/Guardians listed as contacts are considered Emergency Contacts. Please add at least two additional emergency contacts for each of your student(s) – these should be people who you permit to pick up your student from school or who the school office can contact when a parent/guardian cannot be reached.

Please review and update all information. Contact the school office if other changes are required.

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

Last Confirmed: 8/9/2016 10:37:16 AM

Please review and update the contacts for your student. Contact the school office if deletions are required. ----- IN ADDITION TO PARENT CONTACTS, PLEASE ADD OTHER CONTACTS TO BE USED FOR EMERGENCIES OR PICKUP FROM SCHOOL. ----- REPEAT FOR EACH STUDENT IN FAMILY.

Select Record to Change

Name	Address	Relation
<input type="text"/>	<input type="text"/>	Father
<input type="text"/>	<input type="text"/>	Mother
<input type="text"/>	<input type="text"/>	Emergency Contact
<input type="text"/>	<input type="text"/>	Emergency Contact

Step 8: Medical History

Click the **Medical History** tab on the left. Verify the medical information and correct as necessary. The effective dates are not necessary and may be left blank.

Even if no medical information is applicable, or no changes are needed, please click **Save** before continuing to Step 8.

Please review and update all information. Contact the school office if other changes are required.

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

Last Confirmed: 8/9/2016 10:37:34 AM

Please review your student's medical information and contact the school office if changes are required.

Condition	Effective Date	Age	Grade	Comment
<input type="button" value="Save"/>				
Additional Conditions Please Check All That Apply				
<input type="checkbox"/> frequent nose bleeds	<input type="checkbox"/> Allergy - drug	<input type="checkbox"/> Cardiac diagnosis		
<input type="checkbox"/> severe headaches or migraines	<input type="checkbox"/> Allergy - food	<input type="checkbox"/> PE restriction		
<input type="checkbox"/> mild skin problem	<input type="checkbox"/> Allergy - animal	<input type="checkbox"/> Neurological		
<input type="checkbox"/> wears glasses all the time	<input type="checkbox"/> Asthma	<input type="checkbox"/> Orthopedic limitation		
<input type="checkbox"/> eye problem	<input type="checkbox"/> Cerebral Palsy	<input type="checkbox"/> Other significant health problem		
<input type="checkbox"/> wears contacts	<input type="checkbox"/> Confidential Health Problem - see nurse	<input type="checkbox"/> Rx - carries on person		
<input type="checkbox"/> Allergy - anaphylactic	<input type="checkbox"/> Cystic Fibrosis	<input type="checkbox"/> Rx - emergency in health office		
<input type="checkbox"/> spectrum disorder	<input type="checkbox"/> Diabetes	<input type="checkbox"/> Rx - takes at school		
<input type="checkbox"/> Allergy - bee sting	<input type="checkbox"/> Hearing Impairment	<input type="checkbox"/> Seizure Disorder		
<input type="button" value="Save"/>				



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Step 9: Documents

Click the **Documents** tab on the left. Please download and review each document, then **Click to Confirm** that you have read and understood the document. You will need to confirm each document to continue. If you have questions regarding the documents, contact your student's school office.

Please review and update all information. Contact the school office if other changes are required.

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

[Confirm and Continue](#)

Please download and review the registration documents stored here. Please keep a copy for your records. Confirmation buttons are to the right. If not visible, please widen your browser window. All items must be checked to proceed.

Documents	Confirmation
<p>District Tardy Policy - Distrito Reglas para Las Llegadas Tarde Please review this document and confirm that you have read and understood. --- Por favor examine y confirme haciendo clic en el cuadro para dejar constancia de haber leído y entendido el contenido del documento.</p>	<input checked="" type="checkbox"/>
<p>District Absence Policy - Reglas para Ausentismo Escolar Please review this document and confirm that you have read and understood. --- Por favor examine este documento y marque el cuadro para dejar constancia de haberlo leído y entendido.</p>	<input checked="" type="checkbox"/>
<p>Firearms/Dangerous Objects - Armas de Fuego/Objetos Peligrosos Firearms and Other Dangerous Objects --- Please review this document with your student and confirm that you have read, understood, and reviewed school safety and expulsion with your student. --- Armas de Fuego y Otros Objetos Peligrosos --- Por favor descargue y examine el documento. Al marcar el cuadro, deja constancia de haber examinado y entendido las normas escolares respecto a las armas de fuego y otros objetos peligrosos y de haber hablado con su hijo/a sobre la seguridad escolar y la expulsión por quebrantarlo.</p>	<input checked="" type="checkbox"/>

Step 10: Authorizations

Click the **Authorizations** tab on the left. Read and respond to each authorization. If you have questions regarding the authorizations, please contact the main office.

Please review and update all information. Contact the school office if other changes are required.

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

[Confirm and Continue](#)

Last Confirmed: 8/9/2016 10:38:47 AM

Please review your your authorizations and consent forms for your student and contact the school office if changes are required.

Description	Status
<p>Publications - School/District By checking Yes, I give permission to the District for my child to participate in activities that may occasionally be used for school and/or District publicity, publications, or public relations. I understand that in granting this permission, my child's name, picture, art, written work, voice, verbal statements, or portrait (video or still) may be used by the student's school, or the District for "in-house" purposes such as class newsletters, class videos, in-house broadcasting, or District presentations.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p>Publications - Non District By checking Yes, I give permission to the District for my child to participate in activities that may be used for school publicity or District publications and for the District to provide credit to my child if his or her work is highlighted. For example, a student's name, picture, art, written work, voice, verbal statements, or portraits (video or still), may appear in newsletters, videos, or District presentations or publications at the District's discretion, with or without personally identifying the student in this or subsequent years. No monetary consideration shall be paid.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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Step 11: Final Data Confirmation

Click the **Final Data Confirmation** tab on the left. Print the Emergency Card for your records. The Emergency Card contains data as seen by the school staff. If changes are required that cannot be made by you within the Parent Portal, contact the **Attendance Office** to make those changes.

Please review and update all information. Contact the school office if other changes are required.

<input checked="" type="checkbox"/> Family Information	<p>Thank you for confirming the student data in the system. Please confirm the information here is accurate and complete and notify the school office if other changes are required.</p> <p>PLEASE CONFIRM THAT THE INFORMATION ON THE PREVIOUS TABS IS CORRECT</p> <p>Please make sure the information is accurate and complete and contact the school office if other changes are required. Thank you for using the online data confirmation process.</p>
<input checked="" type="checkbox"/> Student	
<input checked="" type="checkbox"/> Contacts	
<input checked="" type="checkbox"/> Medical History	
<input checked="" type="checkbox"/> Documents	
<input checked="" type="checkbox"/> Authorizations	
<input checked="" type="checkbox"/> Final Data Confirmation	

Thank you for updating the data in the system and for completing the confirmation process.

*If you have more than one student in our district, select your other student(s) from the **Change Student** menu and return to Step 3 to confirm the data for each student.*