



Illinka Xerada: Habka Sameynta ee marka hore

Kuwaan soo socdaa waa talaabooyin uu waalidku uu u baahan doono in uu qaado si uu u dhamaystiro sameynta Ilinka galka iyo habka dib u eegida akhbaarta Caafimaadka iyo Emerjinsiyada.

Gelida Marka ugu horeeysa: Sameey xisaab

1. Shabakad (aan ahayn app ka), gal kuwan soo socda URL: <https://tinyurl.com/196ParentKey>
2. U geli coodka la galiyo ee lagugu siiyey dhinaca kale ee boggan sida saxda ah (uma baahnid in aq qorto jiitimaha).

New User?
Activate your Campus Parent account by entering the activation key sent to you by your district.
If you do not have an activation key, please contact your district to obtain one.
Activation Key *

Submit
Back to Login

3. Dooro magaca aad isticmaalayso iyo baas-woorka (mitirka baas-woorku waa khasab in uu gaaro 100%).

Create Campus Parent Account
Welcome
Username *

Password *

Confirm Password *

Password Strength 0%
Submit
Back to Login

4. Riix **Back to Login** ka dibna gal adigoo isticmaalaya akhbaarta kor lagu sameeyey.

Success!
Congratulations! You have successfully created your Campus Parent account!
Back to Login

5. Waafaji emayl xisaabtan si loogala soo baxo baas-woorka, ka dibna gali baas-woorkaaga cusub ka dibna riix **Save**.

Set Email
You are required to set an account security email.
Please enter the email address that can be used for security purposes. An email will be sent to verify the change.
New Account Security Email

Confirm New Account Security Email

Enter Campus Password

Log Off Save

Helitaanada Dambe: Gelida

1. Shabakada, ka gal URL ka kuwan soo socda: <http://www.district196.org/parents> ka dibna riix batoonka **Campus Parent Login**.
2. Geli magaca aad isticmaasho iyo baas-woorka ka dibna riix **Log In**.

Campus Parent
ROSEMOUNT-APPLE VALLEY-EAGAN
Announcements
Thursday June 13, 2019
Parent Username

Password

Log In
Forgot Password? Forgot Username? Help
Log In as Campus Student
OR
New User?

3. Marka ugu horeeysa oo aad gasho waxaa lagu diri inaad buuxiso Habka Dib u eegida Sanadlaha ah ee Akhbaarta Caafimaadka/Emeerjinsiga. Ka eeg wixii habraac ah bogga ku lifaaqan

Aalada Gacanta (Apps):Ka soo bixinta iyo Diyaarinta

1. Kolka aad sameysato baas-woor aadna ku buuxiso khadka (on-line) ka habka Dib u eegida iyo Caafimaadka/Emeerjinsiga, waxaad kala soo bixi kartaa (download) **Campus Parent** iPhone ka ama Android appthe iTunes Store ama Google Play Store adigoo ka baaraya "Campus Parent" goobtii aad rabto.
2. Kolka ugu horeeysa ee aad isticmaasho app ka waxaa lagu waydiin in aad galiso, magaca iskuulka iyo gobolka. Gali iskuulka macagiisa oo ah **Rosemount** ka dibna xulo **Minnesota** oo ah gobolka riixna **Search**.
3. Ka xulo **Rosemount-Apple Valley-Eagan** liiska kuu soo baxa ka dibna gal adigoo isticmaalaya akhbaartii horey loogu sameeyey.



Completing the Emergency Update Process

Once the Campus Parent account is created, you will need to complete the Emergency and Account Information Update process. Following are step-by-step screenshots of that process.

Home | Infinite Campus

< Back | Annual Student Information Review / New Student Pre-Registration

To the Parent or Guardian: Your student's welfare is our first consideration. In case of serious injury or illness of a student in school, the following steps will be taken immediately:

NAME	STATUS	ACTION
Current School Year - 2025-26	REQUIRED	Start

New Student Pre-Registration

NAME	STATUS	ACTION
Current School Year		Start
Early Childhood School		Start

Guji Start

Home | Infinite Campus

< Back | To the Parent or Guardian: Your student's welfare is our first consideration. In case of serious injury or illness of a student in school, the following steps will be taken immediately:

- The school nurse will be called
- Emergency line 911 will be called, if deemed necessary
- You or the person designated as the emergency contact will be called

If none of the persons listed can be reached, school personnel will implement emergency procedures to protect the health and safety of your child. It is your responsibility to make arrangements for proper care in case your child is injured or becomes too ill to stay in school when you are away from home. There have been instances when we could not reach parents or guardians of injured or ill children because the information in our system was not current. To ensure your information is current, please carefully review/update the requested information for your family and enrolled child(ren) listed below by clicking the "Begin" button. Throughout the 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. Your completion acknowledges that this information will be maintained both at school and on the bus (if applicable.) If there is a change in your contact information, please notify the school nurse informed. Thank you for taking the time to complete this annual process so we can better serve your child.

If you only want to pre-register new students for the selected year at this time, please click the "Begin" button.

STUDENT NAME	GRADE	INCLUDED IN NEW APP?	REASON IF NOT INCLUDED	ONLINE REGISTRATION SUBMITTED?
Student Name	Grade	Yes	Included	No
Student Name	Grade	Yes	Included	No

Begin

Guji Bilow.

Infinite Campus Online Registration

English | Espanol

* Indicates a required field

Welcome [Name] Please type in your first and last name in the box below.

By typing your name into the box below you attest that you are the person authenticated into this application or an authorized user of this account, and the data you are entering/verifying is accurate and true to the best of your knowledge.

Type Your First and Last Name to Continue *

Submit

Ku qor magacaga hore iyo kan dambe kadibna dhagsii Soo gudbi.



English | [Espanol](#)

* Indicates a required field

Welcome to the Infinite Campus Online Pre-Registration. Before you begin, please gather the following:

- Household information -- address and phone numbers
- Parent information -- work and cell phone numbers, email addresses
- Student information -- demographic and health/medication information
- Emergency Contact - addresses and phone numbers

Note: Required fields are marked with a red asterisk, and the district will receive the data exactly as it is entered. Please be careful of spelling, capitalization and punctuation. Dates should be entered as MM/DD/YYYY and phone numbers as xxx-xxx-xxxx.

Minnesota law requires the school district to keep accurate, updated records for all students. The information collected on this form will be used for purposes of enrollment, program eligibility, educational services and state and federal reporting. Some of the information requested is voluntary, such as the state/federal reporting and language information section, however, failure to provide some or all of the requested information may limit the school district's ability to enroll and serve your student. This information will be used within the school district on a need-to-know basis, and may also be shared with the Minnesota Department of Education, released pursuant to a subpoena or court order and shared as otherwise permitted by state and federal law. Some of the information may be classified as directory (public) information.

For assistance:

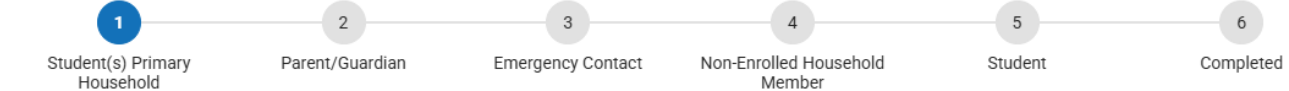
K-12 Students -- Please contact your child's school.

Pre-K -- Please contact the program for which you are registering.

Guji Bilow.

Begin

English | [Espanol](#)



* Indicates a required field

Home phone

This phone number will be used for Emergency calls from the District.

Home Phone *

Next >

Geli lambarka taleefanka gurigaaga. Nambarkaan waxaa loo isticmaali doonaa dhisidda/degmada oo dhan wicitaanada degdega ah ka dibna dhagsii Next.

Home Address

Mailing Address

Save/Continue

1 Student(s) Primary Household 2 Parent/Guardian 3 Emergency Contact 4 Non-Enrolled Household Member 5 Student 6 Completed

* Indicates a required field

Home phone

Home Address

Your address as listed in the portal

Is this address current? *

< Previous Next >

Mailing Address

Save/Continue

Xaqiiji in cinwaanka gurigaagu sax yahay. Su'aasha si sax ah uga jawaab. Geli ciwaanka aad hadda ku sugan tahay ka dibna taabo Next.

1 Student(s) Primary Household 2 Parent/Guardian 3 Emergency Contact 4 Non-Enrolled Household Member 5 Student 6 Completed

* Indicates a required field

Home phone

Home Address

Mailing Address

Does this household receive mail at a different address? *

No

< Previous

Save/Continue

Xaqiiji in cinwaankaaga boostada uu la mid yahay cinwaanka gurigaaga. Haddii kale, su'aasha si sax ah uga jawaab. Keydso/sii wad



✓

Student(s) Primary Household

!

Parent/Guardian

3

Emergency Contact

4

Non-Enrolled Household Member

5

Student

6

Completed

* Indicates a required field

Parent/Guardian

FULL NAME	RECORD TYPE	COMPLETED
	Existing	INCOMPLETE >
	Existing	INCOMPLETE >

In order to help prevent the creation of duplicate records, please do not create new records in this section for the following:

FULL NAME	
	Already in
	Already in
	Alre
	Already in this application as a Student

Add New Legal Parent/Guardian

Please list all Legal Primary Parent/Guardian's living in your Household.
Do not list a Parent/Guardian not living in your household.

< Back Save/Continue

Guji Magaca buuxa ee waalid/masuul kasta oo jaalaha lagu iftiimiyay oo mid kasta u buuxi afarta tallaabo ee soo socota.

✓

Student(s) Primary Household

!

Parent/Guardian

3

Emergency Contact

4

Non-Enrolled Household Member

5

Student

6

Completed

* Indicates a required field

Parent/Guardian Name:

Demographics

Below is the information we have on record for you. For changes, please contact census@district196.org

First Name *

Middle Name

Last Name *

Suffix

Birth Date

MM/DD/YYYY

Gender *

Female

Primary Language

English

Does this person live at the address listed below? *

Yes

Next >

Xaqiiji xogta tirakoobka waalidka. Haddii loo baahdo isbeddello aadan samayn karin, dhagsii xiriirka iimaylka si aad u dirto farriin tilmaamaysa isbeddellada lagama maarmaanka ah. Guji Next.



Progress bar: 1. Student(s) Primary Household (✓), 2. Parent/Guardian (!), 3. Emergency Contact, 4. Non-Enrolled Household Member, 5. Student, 6. Completed

* Indicates a required field

Parent/Guardian Name: [Redacted]

Demographics [✓] +

Contact Information [●] -

At least one Phone Number is required.

Update / Review the contact information for this parent/guardian. Check the Contact Preferences box for message types you want to receive via Email.

Cell Phone: [Redacted]

Work Phone: [Redacted]

Other Phone: [Redacted]

Email: [Redacted]

Secondary Email: [Redacted]

Preferred Language
What is your preferred language for school communications pertaining to your child's education?
En que idioma prefiere recibir información escolar acerca de la educación de su estudiante?
Waa maxay luqada aad rabtid in iskuulku kugula soo xiriiro ee ku saabsan waxbarashada ilmahaaga?
[Redacted]

Contact Preferences

EMERGENCY	GENERAL	TEACHER
☒	☒	☒

Description of Contact Preferences
Emergency - Marking this checkbox will use this method of contact for emergency messages
General - Marking this checkbox will use this method of contact for general school messages, s
Teacher - Marking this checkbox will use this method of contact for teacher-sent messages, inc

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Xaqiiji/ku dar nambarada teleefanka / iimaylada. Dooro xulashooyinka sare ee noocyada ogeysiisyada aad rabto inaad ku hesho iimaylka. Geli Luqadaada Doorbiday Guji Next.

Progress bar: 1. Student(s) Primary Household (✓), 2. Parent/Guardian (!), 3. Emergency Contact, 4. Non-Enrolled Household Member, 5. Student, 6. Completed

* Indicates a required field

Parent/Guardian Name: [Redacted]

Demographics [✓] +

Contact Information [✓] +

Seasonal Employment [●] -

Has this person, within the past 36 months, relocated with the intent to obtain seasonal or temporary employment in agriculture, fishing, and dairy or food processing work?
*
☐ Yes
☐ No

< Previous Next >

Military Connections [●] +

Dooro ikhtiyaarka ku habboon ka dibna dhagsii Next.



Progress bar: 1. Student(s) Primary Household (✓), 2. Parent/Guardian (!), 3. Emergency Contact, 4. Non-Enrolled Household Member, 5. Student, 6. Completed

* Indicates a required field

Parent/Guardian Name: [Redacted]

Demographics [✓] +

Contact Information [✓] +

Seasonal Employment [✓] +

Military Connections [•] -

Federal Impact Aid (FIA) Section 8003 Grant Information.

Parent/Guardian in Military

*
☐ Yes, this individual is a member of the military
☐ No, this individual is not a member of the military

< Previous

Cancel Save/Continue

Dooro ikhtiyaarka ku habboon ka dibna dhagsii Save/Continue.

Progress bar: 1. Student(s) Primary Household (✓), 2. Parent/Guardian (2), 3. Emergency Contact, 4. Non-Enrolled Household Member, 5. Student, 6. Completed

* Indicates a required field

Parent/Guardian

FULL NAME	RECORD TYPE	COMPLETED
[Redacted]	Existing	COMPLETED >
[Redacted]	Existing	COMPLETED >

In order to help prevent the creation of duplicate records, please do not create new records in this section for the following people:

FULL NAME	REASON
[Redacted]	Already in this app
[Redacted]	Already in this app
[Redacted]	Already in th
[Redacted]	Already in th

Add New Legal Parent/Guardian

Please list all Legal Primary Parent/Guardian's living in your Household.
 Do not list a Parent/Guardian not living in your household.

< Back Save/Continue

Marka dhammaan waalidiinta/mas'uuliyiinta liiska ku qoran ay muujiyaan sida la dhammaystiray, dhagsii Save/Continue.

✓

Student(s) Primary Household

✓

Parent/Guardian

!

Emergency Contact

4

Non-Enrolled Household Member

5

Student

6

Completed

* Indicates a required field

Emergency Contact

FULL NAME	RECORD TYPE	COMPLETED
	Existing	INCOMPLETE
	Existing	INCOMPLETE

In order to help prevent the creation of duplicate records, please do not create new records in this section for the following people:

FULL NAME	REASON
	Already added
	Already added
	Already added
	Already added

Add New Emergency Contact

In AN EMERGENCY, if parent/guardian cannot be contacted, please call one of the following Emergency contacts released to emergency contacts.

Cusbooneysii/dib u eeg Xiriirada Degdegga ah ee lagu muujiyay jaalaha adiga oo gujinaya Magaca buuxa. Si aad ugu darto Xiriir Degdeg ah, dhagsii Ku dar Xiriir Cusub oo Degdeg ah ama dhagsii Save/Continue hadii aadan rabin inaad mid ku darto oo ka boodo afarta talaabo ee soo socota.

✓

Student(s) Primary Household

✓

Parent/Guardian

!

Emergency Contact

4

Non-Enrolled Household Member

5

Student

6

Completed

* Indicates a required field

Contact Name:

Demographics

Please complete the following information for each emergency contact for your students.

First Name *

Middle Name

Last Name *

Suffix

Gender *

Is this person still an emergency contact for at least one student in this household? *

Yes

Next >

Gali/dib u eeg macluumaadka la codsaday oo guji Next.



Progress bar: 1. Student(s) Primary Household (✓), 2. Parent/Guardian (✓), 3. Emergency Contact (!), 4. Non-Enrolled Household Member, 5. Student, 6. Completed

* Indicates a required field

Contact Name: [Redacted]

Demographics (✓) +

Contact Information (✓) -

Enter the contact information for this emergency contact.

At least one Phone Number is required.

Home Phone: [Redacted]

Cell Phone: () - -

Work Phone: () - - X

Email: [Redacted]

< Previous Next >

Geli / Dib u eeg macluumaadka la codsaday. Geli ugu yaraan hal lambar oo taleefoon ah ka dibna dhagsii Next.

Progress bar: 1. Student(s) Primary Household (✓), 2. Parent/Guardian (✓), 3. Emergency Contact (!), 4. Non-Enrolled Household Member, 5. Student, 6. Completed

* Indicates a required field

Contact Name: [Redacted]

Demographics (✓) +

Contact Information (✓) +

Verification (✓) -

Please enter the address for this emergency contact. This information will only be used to verify the contact.

Does this emergency contact live at the address below? *

No

[Redacted]

Address Line 1: [Redacted]

Address Line 2: [Redacted]

Example
Address Line 1 - 123 S Main St Apt 4
Address Line 2 - Schenectady, NY 12345

< Previous

Cancel Save/Continue

Geli/dib u eeg ciwaanka Xiriiriyaha Degdegga ah ama dooro jawaabta saxda ah haddii ay ku nool yihiin isla ciwaanka ku yaal ka dibna dhagsii Save/Continue.



✓

Student(s) Primary Household

✓

Parent/Guardian

3

Emergency Contact

4

Non-Enrolled Household Member

5

Student

6

Completed

* Indicates a required field

Emergency Contact

FULL NAME	RECORD TYPE	COMPLETED
	Existing	COMPLETED >
	Existing	COMPLETED >

In order to help prevent the creation of duplicate records, please do not create new records in this section for the following people:

FULL NAME	REASON
	Already in this application as a Parent/Guardian
	Already in this application as a Parent/Guardian
	Already in this application as a Parent/Guardian
	Already in this application as a Parent/Guardian

Add New Emergency Contact

In AN EMERGENCY, if parent/guardian cannot be contacted, please call one of the following Emergency Contacts listed. Proper identification will be required before a student is released to emergency contacts.

< Back

Save/Continue

Marka dhammaan Xiriirada Degdegga ah la dhammeeyo dhagsii Save/Continue.

✓

Student(s) Primary Household

✓

Parent/Guardian

✓

Emergency Contact

4

Non-Enrolled Household Member

5

Student

6

Completed

< Back

Save/Continue

Geli/dib u eeg Xubnaha Qoyska ee Aan Diiwaangashanayn. Ha gelin dadka ku qoran aaggan.

Guji Wax ka beddel/Dib u eegis qof kasta oo ku qoran midab jaalle ah oo u buuxi tillaabada xigta mid kasta.

Marka dhammaan liiska dib loo eego, dhagsii Save/Continue.



✓

Student(s) Primary Household

✓

Parent/Guardian

✓

Emergency Contact

✓

Non-Enrolled Household Member

!

Student

6

Completed

* Indicates a required field

Student

FULL NAME	SCHOOL	RECORD TYPE	COMPLETED
	Rosemount Middle School	Existing	INCOMPLETE >
	Rosemount Elementary	Existing	INCOMPLETE >

In order to help prevent the creation of duplicate records, please do not create new records in this section for the following people:

FULL NAME	REASON
	Already
	Already
	Already
	Already

Add New Student

Please include all students that need to be enrolled.

< Back
Save/Continue

Guji Magaca buuxa ee Ardayga ilmo kasta oo ku taxan oo midab jaalle ah ku qoran oo mid kasta u buuxi 9-ka tallaabo ee xiga.

✓

Student(s) Primary Household

✓

Parent/Guardian

✓

Emergency Contact

✓

Non-Enrolled Household Member

!

Student

6

Completed

Legal First Name *

Gender *

Legal Middle Name

Birth Date *

Legal Last Name *

Suffix

Nickname

Student Cell Number

() - -

Was your child born outside of the USA, Puerto Rico or U.S. Territories?

Next >

Dib u eeg xogta tirakoobka Ha beddelin Fasalka Diiwaangelinta! Haddii loo baahdo, u dir iimaylka isbeddellada la codsaday adoo isticmaalaya xidhiidhka iimaylka. Ardayda fasalada 11 ama 12, dooro Haa ama Maya su'aasha Sarrifka Qalaad ee Ardayga ka dibna dhagsii Next.



Progress bar: Student(s) Primary Household (✓), Parent/Guardian (✓), Emergency Contact (✓), Non-Enrolled Household Member (✓), Student (!), Completed (6)

* Indicates a required field

Student Name: [Redacted]

Demographics (+)

Race Ethnicity (-)

Is Hispanic/Latino *
No

Please check all that apply. At least one is required. *

American Indian or Alaska Native ☐

Asian ☐

Black or African American ☐

Native Hawaiian or Other Pacific Islander ☐

White ☒

State Race / Ethnicity *
Not North American I...

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Dooro ikhtiyaarada ku haboon ka dibna dhagsii Next.

Progress bar: Student(s) Primary Household (✓), Parent/Guardian (✓), Emergency Contact (✓), Non-Enrolled Household Member (✓), Student (!), Completed (6)

* Indicates a required field

Student Name: [Redacted]

Demographics (+)

Race Ethnicity (+)

Relationships - Parent/Guardians (-)

Please review/update Relationship and Contact Sequence.

NAME	RELATIONSHIP TO STUDENT *	GUARDIAN	MAILING	PORTAL	MESSENGER	CONTACT SEQUENCE *
[Redacted]	Mother	☒	☒	☒	☒	1
[Redacted]	Father	☒	☒	☒	☒	2

Description of Contact Preferences

Guardian - Marking this checkbox will flag this person as legal guardian to the student.

Mailing - Marking this checkbox will flag this person to receive mail from the district.

Portal - Marking this checkbox will flag this person as a portal account holder.

Messenger - Marking this checkbox will flag this person to receive messages from the district.

Contact Sequence - Adding a sequence number on contacts will provide a sequence of 1.

No Relationship - Selecting this relationship will indicate that this person no longer has a relationship to the student. The relationship will be removed from the system.

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Dooro ikhtiyaarada ku haboon waalid kasta/mas'uul kasta oo liiska ku jira adiga oo isticmaalaya sharraxaadaha la bixiyay. Dooro isku xigxiga xiriirka aad jeclaan lahayd in mid walba lagula soo xiriiro ka dibna dhagsii Next.



Progress bar: Student(s) Primary Household (✓), Parent/Guardian (✓), Emergency Contact (✓), Non-Enrolled Household Member (✓), Student (!), Completed (6)

* Indicates a required field

Student Name: [Redacted]

- Demographics
- Race Ethnicity
- Relationships - Parent/Guardians
- Relationships - Emergency Contacts

Dooro xiriirka ku habboon xiriir kasta oo degdeg ah oo liiska ku jira. Dooro isku xigxiga xiriirka aad rabto in mid walba lala xiriiro. Taxanahan waxa ku jira waalidka/masuulka shaashadii hore. Guji Next.

NAME	RELATIONSHIP TO STUDENT *	CONTACT SEQUENCE *
[Redacted]	Grandparent	4
[Redacted]	Grandparent	3

Description of Contact Preferences
Contact Sequence - Adding a sequence number on contacts will prompt district staff to contact these persons in the order that you specify. Parent/Guardians should start with a sequence of 1.
No Relationship - Marking this checkbox will indicate that this person does not share a relationship to the student. By checking this checkbox you are indicating that this person no longer has a relationship to the student. The relationship will be ended if one exists.

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Progress bar: Student(s) Primary Household (✓), Parent/Guardian (✓), Emergency Contact (✓), Non-Enrolled Household Member (✓), Student (!), Completed (6)

* Indicates a required field

Student Name: [Redacted]

- Demographics
- Race Ethnicity
- Relationships - Parent/Guardians
- Relationships - Emergency Contacts
- Relationships - Other Household

U dooro xidhiidhka ku habboon xubin kasta oo qoyska ka mid ah (haddii ay jiraan) dabadeed dhagsii Next.

NAME	RELATIONSHIP TO STUDENT *
[Redacted]	Sibling

Description of Contact Preferences
No Relationship - Marking this checkbox will indicate that this person does not share a relationship to the student. By checking this checkbox you are indicating that this person no longer has a relationship to the student. The relationship will be ended if one exists.

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Progress bar: Student(s) Primary Household (✓), Parent/Guardian (✓), Emergency Contact (✓), Non-Enrolled Household Member (✓), Student (!), Completed (6)

* Indicates a required field

Student Name: [Redacted]

- Demographics
- Race Ethnicity
- Relationships - Parent/Guardians
- Relationships - Emergency Contacts
- Relationships - Other Household
- Health Conditions / Medications

Please contact your child's school nurse directly if:
Your child has any new health conditions or changes to existing health conditions AND/OR
Your child will need medication or procedures administered at school

A list of school health office phone numbers can be found at www.district196.org/services/health-services
The link above will open a new tab in your browser. Please navigate back to this window to continue.

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La xidhiidh dugsiga ardaygaaga haddii loo baahdo.
Guji Next.

Progress bar: Student(s) Primary Household (✓), Parent/Guardian (✓), Emergency Contact (✓), Non-Enrolled Household Member (✓), Student (!), Completed (6)

* Indicates a required field

Student Name: [Redacted]

- Demographics
- Race Ethnicity
- Relationships - Parent/Guardians
- Relationships - Emergency Contacts
- Relationships - Other Household
- Health Conditions / Medications
- Student Self-Carry of Medication Authorization

1. My child has my permission to self-carry and self-administer Emergency Medications. *

[Dropdown menu]

2. My child has my permission to self-carry and self-administer Nonprescription Pain Medications. *

[Dropdown menu]

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Tilmaan haddii aad u ogolaato ardaygaaga inuu iskiis u qaado daawada adigoo ku jawaabaya Haa ama Maya adoo isticmaalaya liiska hoos-u-jiidka ah. Guji Next.



Student(s) Primary Household Parent/Guardian Emergency Contact Non-Enrolled Household Member Student Completed

* Indicates a required field

Student Name: : [Redacted]

- Demographics
- Race Ethnicity
- Relationships - Parent/Guardians
- Relationships - Emergency Contacts
- Relationships - Other Household
- Health Conditions / Medications
- Student Self-Carry of Medication Authorization
- Release Agreements

Instructional Release Agreement - To review the Instructional Release Agreement , please click [here](#)

My child has permission to participate in photographed, audiotaped or videotaped math and literacy projects.

iPad Student User Agreement - To review the iPad Student User Agreement, please click [here](#)

By clicking this box, I acknowledge that I have reviewed the iPad Student User Agreement.

NOTE: This does NOT sign you up for the Optional Protection Plan! To sign up for the Optional Protection Plan, click [here](#) *

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Adigoo isticmaalaya liiska hoos-u-jiidka ah, dooro Haa ama Maya si aad u fasaxdo ubadkan shay kasta oo liiska ku jira (guji xidhiidhka si aad dib u eegto).

Guji Next.

Student Digital Access Survey

Thank you for participating in the Student Digital Access Survey. This survey collects information on student access to the Internet and electronic devices used for schoolwork in the student's home. Independent School District 196 may use this information to identify students that could benefit from additional supports to make sure they can access learning opportunities outside the classroom or school building. It is important that we gather accurate information from every student so that each student and family has the equipment, help and support needed.

The information you provide in this survey will be reported to the Minnesota Department of Education (MDE). MDE may provide state- or school-level summary data—without personal, identifying information—to the Governor, legislators, agency staff and external partners who have established data sharing agreements and protocols. Independent School District 196 will not share your personal, identifying information provided in this survey with others without your consent.

Today's Date: (MM/DD/YYYY) *

MM/DD/YYYY

1. What type of electronic device does the student usually use to complete homework? (select only one) *

2. Is the electronic device (from question 1) provided by the school, personal or other? *

3. Is the electronic device (from question 1) shared with anyone else in the home? *

4. Can the student access the Internet on their electronic device at home? *

5. What kind of Internet service do you have at home? *

6. Can the student stream a video on their electronic device without pauses? *

< Previous

Cancel Save/Continue

Ka jawaab su'aal kasta oo loo baahan yahay.

Guji Keydi/sii wad

Progress bar: Student(s) Primary Household, Parent/Guardian, Emergency Contact, Non-Enrolled Household Member, **5 Student**, 6 Completed

* Indicates a required field

Student

FULL NAME	SCHOOL	RECORD TYPE	COMPLETED
[Redacted]	[Redacted]	Existing	COMPLETED >
[Redacted]	[Redacted]	Existing	COMPLETED >

In order to help prevent the creation of duplicate records, please do not create new records in this section for the following people:

FULL NAME	REASON
[Redacted]	Already in
[Redacted]	Already in
[Redacted]	Already in the
[Redacted]	Already in the application as an emergency contact

Marka dhammaan carruurta liiska ku qorani ay muujiyaan inay dhammaystirmeen, dhagsii Save/Continue.

Add New Student

Please include all students that need to be enrolled.

< Back Save/Continue

Progress bar: Student(s) Primary Household, Parent/Guardian, Emergency Contact, Non-Enrolled Household Member, Student, **6 Completed**

* Indicates a required field

PLEASE NOTE: Prior to submitting your application you may verify all of the data you have entered by going back to information is not submitted until you click the Submit button above. You will receive an email notification that your

You must submit your application by clicking the following button.

Back Application Summary PDF Submit

Hawshu hadda waa la dhammeeyey waxaana dib loo eegi karaa adigoo gujinaya cinwaannada qaybta sare ama soo dejinta nuqul PDF ah. Marka aad ku qanacdo jawaabaha, dhagsii Gudbi.

OGOW: Is bedelada la soo gudbiyey waxaa dhici karta in loo baahdo in ay dib u eegaan shaqaalaha iskuulku ka hor inta la gelin kombuyuutarka. Maadaama la filayo in hawl badan laga mari doono dhaqan gelintan, waxa aan idin ku mahad celinaynaa samirkiina la xiriira sugida jawaabaha codsiyada aan ku hawlan nahay.

