

POWERSCHOOL RETURNING STUDENT REGISTRATION INSTRUCTIONS

You must create a Parent Portal account in order to register. If you have not done so, click the link below and follow those instructions to create your account.

- [Click here for Powerschool Parent Portal Setup and Access Instructions.](#)

1. Open an internet browser on your computer and enter <http://bsd2.powerschool.com/public>

The screenshot shows the PowerSchool SIS Parent Sign In page. The page has a dark blue header with the PowerSchool SIS logo. Below the header, there are two tabs: "Sign In" and "Create Account". The "Sign In" tab is selected. Underneath, there is a "Select Language" dropdown menu with "English" selected and "Spanish" as an option. Below the language selection are fields for "Username" and "Password". A "Forgot Username or Password?" link is located below the password field. At the bottom of the sign-in section is a "Sign In" button. Below this section is a "Student Sign In" section with a "Student Sign In" button. Red arrows point to the "English" option in the language dropdown, the "Username" and "Password" fields, and the "Sign In" button. The instructions are: 2. Select preferred language. 3. Enter login credentials. 4. Click sign in.

PowerSchool SIS

Parent Sign In

Sign In Create Account

Select Language

✓ English
Spanish

Username

Password

[Forgot Username or Password?](#)

Sign In

Student Sign In

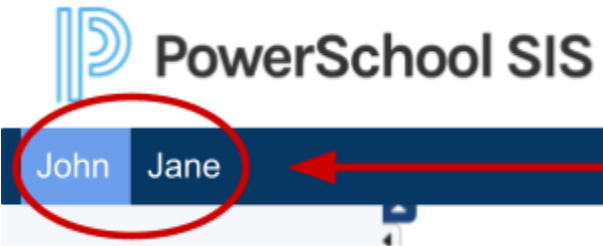
Students - Click the button to sign in. You will be redirected to the Student sign in page.

Student Sign In

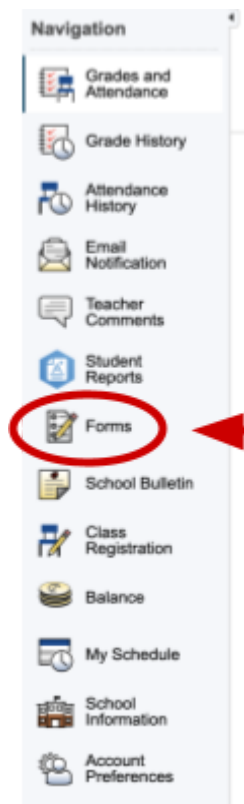
2. Select preferred language.

3. Enter login credentials.

4. Click sign in.



5. Names of students linked to your account will be listed in the top left corner of the page. Click the name of the student you want to register.



6. Click the "Forms" icon in the "Navigation" menu.

7. Click "2026-2027 Registration"

8. Update the "Student Information" section as necessary.

STUDENT INFORMATION

Last Name * <input type="text" value="Doe"/>	Middle Name <input type="text"/>	First Name * <input type="text" value="John"/>
Gender * <input type="text" value="Male"/>	Birth Date * <input type="text" value="01/01/2007"/>	
Home Address * <input type="text" value="210 S Church Rd, APT 200"/>	City * <input type="text" value="Bensenville"/>	
State * <input type="text" value="Illinois"/>	Zip Code * <input type="text" value="60106"/>	
Mailing Address <input type="text" value="210 S Church Rd, APT 200"/>	City <input type="text" value="Bensenville"/>	
State <input type="text" value="Illinois"/>	Zip Code <input type="text" value="60106"/>	
Home Phone (xxx-xxx-xxxx) <input type="text" value="630-766-5940"/>		

9. Answer the four questions in the "Parent/Guardian/Emergency Contact" section.

PARENT / GUARDIAN / EMERGENCY CONTACT

Military Connected Student *
Does the child's parent or guardian serve in the military, including National Guard or Reserve?
 Yes No

Preferred Language For a Phone Notification *
The district has implemented a phone notification system for emergencies and important events. In what language do you wish to receive the message?
 English Spanish Polish

Who Should Receive Communication From School/District *
 Mother Father Both Guardian

Preferred Non-Emergency Communication By *
By clicking "Text" or "Both" I agree to receiving SMS messages
 Email Text Both

Parent/Guardian and Emergency Contacts *
Please list all parents/legal guardians and at least two (2) emergency contacts apart from the parents/legal guardians.

First Name	Middle Name	Last Name	Relationship	Phone Type	Phone	Address	Email	Custody	Lives with	School Pickup	Emergency Contact	Data Access
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10. Update the "Parent/Guardian and Emergency Contacts" as necessary.

Parent/Guardian and Emergency Contacts



Please list all parents/legal guardians and at least two (2) emergency contacts apart from the parents/legal guardians

Add

Joan Doe
Mother

9999999999 (Mobile)

- ✓ Lives with Student
- ⊘ Custody
- ✓ School Pickup
- ✓ Emergency Contact
- ✓ Data Access

Click the "Add" button to add a new contact.

Click the pencil icon to edit an existing contact.

Click the X icon to delete an existing contact.

11. Update the Transportation Service section as necessary

Transportation Service

I understand that it is the school district's practice that students are limited to one bus route in the morning and afternoon, if the student resides at a distance of one and one-half miles or more from his or her assigned school. Students must depart the bus at the same bus stop everyday. This rule is intended to ensure safe and orderly transportation of Bensenville School District 2 students.

Will your student need district transportation to and from school?

- Yes No

Daycare addresses submitted in advance will be honored if the daycare provider's address qualifies for transportation to your child's home-school. There is a limited capacity to each bus route and students are assigned on a space available basis. In most circumstances, change of transportation requests can be honored in 3-5 days.

Will your student need district transportation to and from daycare?

- Yes No

Location

- Home Sitter Neighbor Other

Name of daycare provider *

Phone Number (xxx-xxx-xxxx) *

If other, please specify

Bus Pick-up and Drop off Address *

12. Review the “Current Medical Conditions,” and add any necessary updates in the box below. Then update the information listed for your family doctor and dentist as necessary.

Does your child have any **NEW** or **CHANGES TO** the following:

Allergies *

Yes No

Please provide additional information (Allergies)

Medications (taken at home or at school) *

Yes No

Please provide additional information (Medications)

Surgeries/procedures *

Yes No

Please provide additional information
(Surgeries/procedures)

Major illnesses *

Yes No

Please provide additional information (Major illnesses)

Major injuries *

Yes No

Please provide additional information (Major injuries)

Hospitalizations *

Yes No

Please provide additional information (Hospitalizations)

Medical/psychiatric diagnosis *

Yes No

Please provide additional information (Medical/psychiatric
diagnosis)

Medical action plans/need for emergency medication (ie. Seizure, Asthma, Diabetes, Allergy) *

Yes No

Please provide additional information (Medical action/need
for emergency medication)

Vision or hearing related concerns or updated device/glasses or contacts prescription? *

Yes No

13. Enter your name in the “Signature of Parent or Guardian” section and click the “Submit” button to complete your registration.

As a parent and/or guardian, I do hereby authorize the treatment by a qualified and licensed medical doctor of the above-named minor in the event of a medical emergency in the opinion of the attending physician, may endanger his/her life, cause disfigurement, physical impairment or undue discomfort if delayed. In an emergency, I authorize transportation of my child to a hospital. This authority is granted only after reasonable effort has been made to reach me.

Signature of Parent / Guardian *

Date *



14. Complete the Student Handbook acknowledgment section after reviewing the handbook.

Handbook Acknowledgement

Parent/Student Handbook *

I have been provided and have reviewed the Student Handbook [here](#). I understand that not following the policies outlined may result in loss of privileges, suspension or expulsion from school.

Yes, I understand

15. Answer the Household Income questions.

Household Income

Because we do not charge any fees in our District, including no lunch fees, no field trip fees, and no school registration fees, this form is the only way we can collect the information needed to determine the level of funding our schools are eligible to receive.

When families complete this form, our district can more accurately reflect the number of students who qualify for free and reduced-price meals. This information is used by the state and federal government to determine how much funding our schools receive. These funds directly support essential programs such as:

- Classroom resources and instructional materials
- Academic support and intervention services
- After-school programs and extracurricular activities
- Technology, counseling, and family support services

If families choose not to fill out the form, our district's numbers appear lower than they truly are, which unfortunately means **less funding for our schools and fewer opportunities for our students**. Please know that your information will be kept **private** and **confidential**, it is only used to determine eligibility for state and federal education benefits. Completing the form does not affect your taxes, immigration status, or any other services you may receive. The form is not shared with any outside agency, only our district has access. We only report numbers, not individual names.

By taking a few minutes to complete this form, you are helping ensure that every student in our district receives the support they need to thrive.

Do you or your household qualify for any of the following federal assistance programs? *

- Medicaid
- Homeless Assistance
- SNAP (Supplemental Nutrition Assistance Program)
- TANF (Temporary Assistance for Needy Families)
- None of above

What is your household size? *

- 2 3 4 5 or more

Names of all household members

First, Middle Initial, Last

<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

What is your household income? *

How often it was received *

- Weekly Biweekly Monthly
 Annually

16. Enter your name in the “Signature of Parent or Guardian” section, fill out the date, and click the “Submit” button to complete your Household Income information.

Acknowledgement Signature

I verify that all the information provided is true and correct to the best of my knowledge.

Signature of Parent / Guardian *

Date *

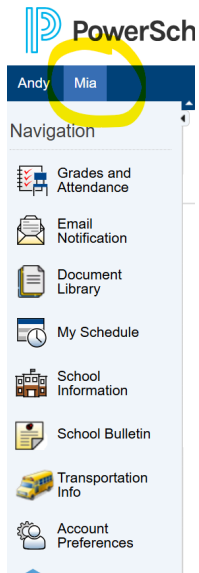
{{today}}

NOTE: Each student returning to District 2 next year must be registered. To register another student, click their name in the blue bar at the top of the page and repeat Step 2

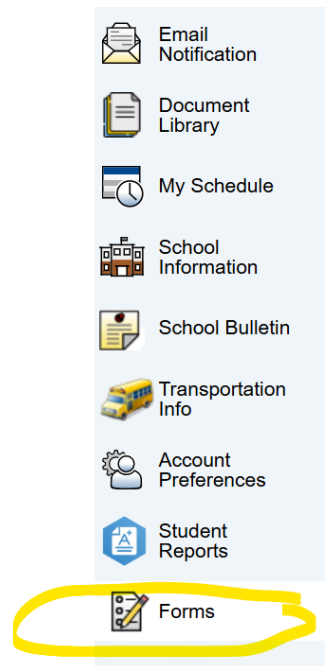
POWERSCHOOL INCOMING 6TH GRADE - PROOF OF RESIDENCY

This year incoming 6th grade students must upload Proof of Residency.

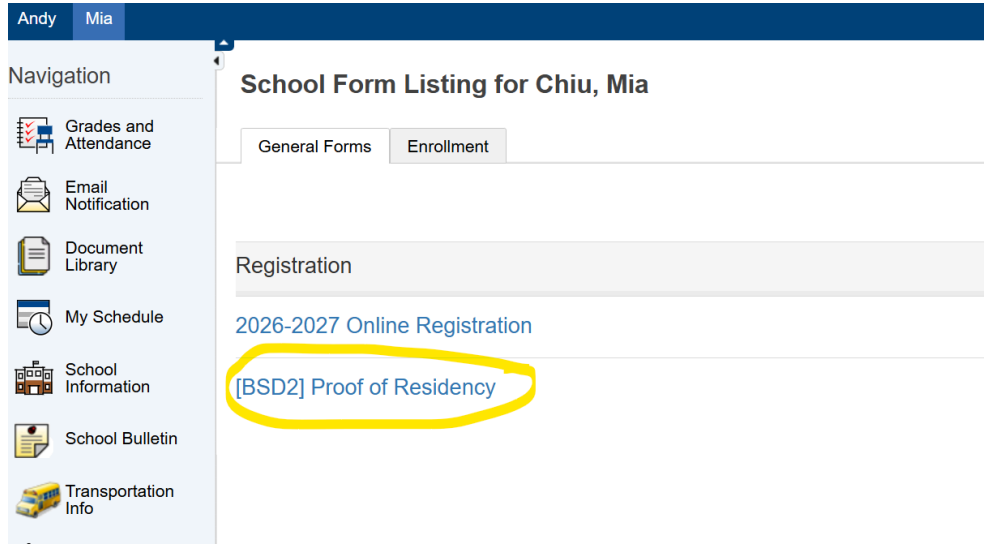
1. Login to PowerSchool
2. Click on student name:



3. Select "forms" at the bottom of the menu:



4. In the general forms tab, select "Proof of Residency"



5. Fill out the Proof of Residency questions

Proof of Residency

You are required to provide documentation of the student's residence within the service area of the school you wish to enroll them in.

One (1) of the following must show parent/guardian name and District 2 address where you are living at this time: *

- Mortgage papers (homeowners) or recent mortgage statement or Property Tax Bill
- Signed and dated lease agreement (renters)
- Letter of Residence from landlord in lieu of lease (7.60-AP2,E1)
- Letter of Residence to be used when the person seeking to enroll a student is living with a District 2 resident (We still require a lease agreement or mortgage papers of the resident whom the student is living with.) (7.60-AP2,E2)

Also, three (3) additional documents from the list below, with District 2 address where you are living at this time: These documents should be the most recent *

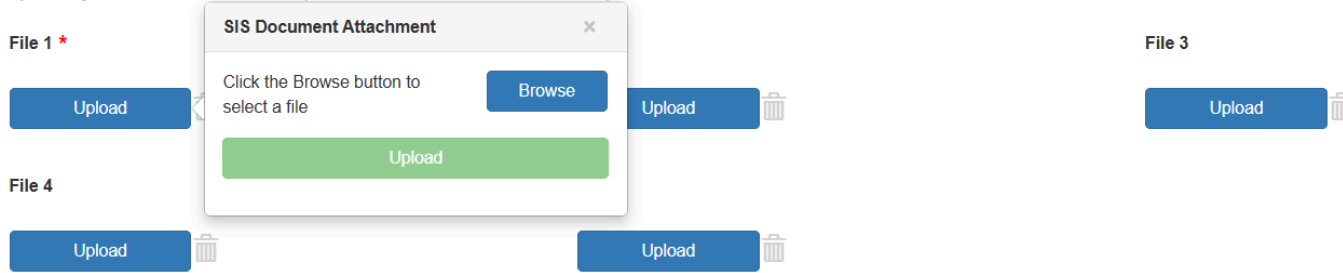
<input type="checkbox"/> Bank Account (saving or checking)	<input type="checkbox"/> Cable television bill
<input type="checkbox"/> Chang of Address form from Post Office	<input type="checkbox"/> Credit card bill
<input type="checkbox"/> Insurance Policy - Homeowner's/Renters/Auto	<input type="checkbox"/> Loan Payment book
<input type="checkbox"/> Paycheck showing current address	<input type="checkbox"/> Phone Bill - Home or Cell
<input type="checkbox"/> Public aid card/Medical Card w/current address	<input type="checkbox"/> Utility Bill (e.g. gas, electric, water)
<input type="checkbox"/> Vehicle registration	<input type="checkbox"/> Voter registration card
<input type="checkbox"/> Photo Identification Driver's License, Illinois State ID, ID from Consulate	

Upload your documents here (each file can not exceed 2MB)

File 1 *	File 2	File 3
<input type="button" value="Upload"/>	<input type="button" value="Upload"/>	<input type="button" value="Upload"/>
File 4	File 5	
<input type="button" value="Upload"/>	<input type="button" value="Upload"/>	

6. Upload your proof of residency documents by clicking “upload”

Upload your documents here (each file can not exceed 2MB)



Tuition will be charged to students later found to be non-residents, retroactive to the enrollment date. Tuition was over \$1,500 per month last year. False residency claims are criminal offenses in Illinois. Fines and jail time are both possible penalties.

7. Once you have completed the form and uploaded your documents, select “submit”

Letter of residence to be used when the person seeking to enroll a student is living with a District 2 resident (we shall require a lease agreement or mortgage papers of the resident with which the student is living with.) (1-00-AP2,E2)

Also, three (3) additional documents from the list below, with District 2 address where you are living at this time: These documents should be the most recent *

<input type="checkbox"/> Bank Account (saving or checking)	<input type="checkbox"/> Cable television bill
<input type="checkbox"/> Change of Address form from Post Office	<input type="checkbox"/> Credit card bill
<input type="checkbox"/> Insurance Policy - Homeowner's/Renters/Auto	<input type="checkbox"/> Loan Payment book
<input type="checkbox"/> Paycheck showing current address	<input type="checkbox"/> Phone Bill - Home or Cell
<input type="checkbox"/> Public aid card/Medical Card w/current address	<input type="checkbox"/> Utility Bill (e.g. gas, electric, water)
<input type="checkbox"/> Vehicle registration	<input type="checkbox"/> Voter registration card
<input type="checkbox"/> Photo Identification Driver's License, Illinois State ID, ID from Consulate	

Upload your documents here (each file can not exceed 2MB)

File 1 * File 3

A screenshot of a document upload interface, similar to the one in step 6. It shows the same upload area with a modal window open. Below the upload area, there is a warning message: "Tuition will be charged to students later found to be non-residents, retroactive to the enrollment date. Tuition was over \$1,500 per month last year. False residency claims are criminal offenses in Illinois. Fines and jail time are both possible penalties." At the bottom of the form, there is a green "Save for Later" button and a blue "Submit" button with a dropdown arrow. The "Submit" button is circled in yellow.