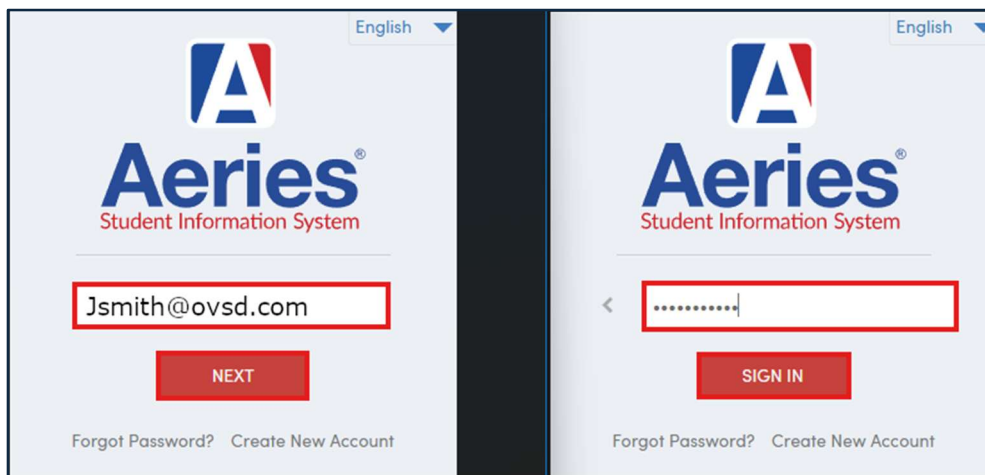


Guía de confirmación de datos en Aeries para padres

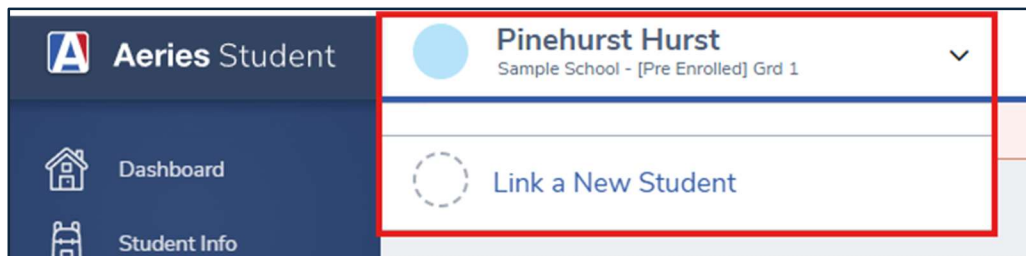
Información adicional sobre Aeries: Página de [Tecnología de la Información](#), pestaña “Aeries Parent Portal Assistance” (“Asistencia para el portal de padres de Aeries”).

Inicio de la confirmación de datos de los padres en Aeries:

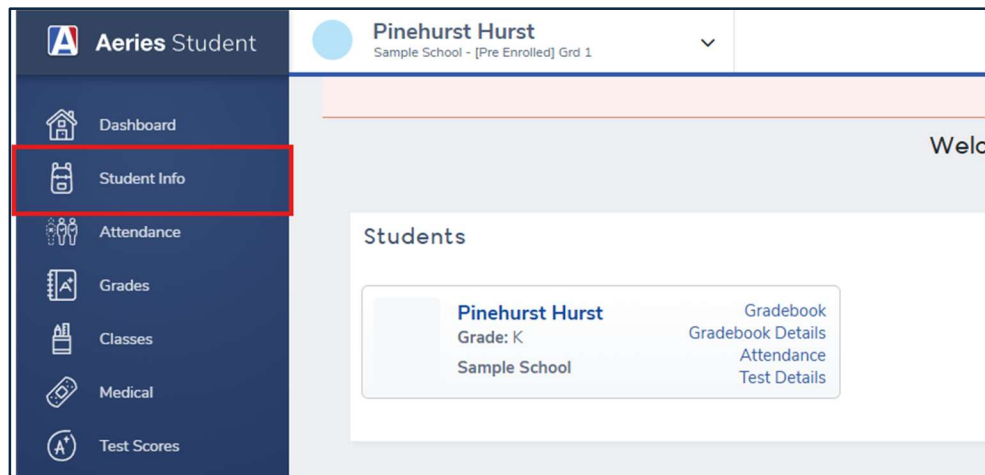
1. Inicie sesión en el Portal para Padres de Aeries.



2. **Opcional:** Si **tiene varios hijos**, haga clic en el nombre de cada uno en la esquina superior izquierda. Se abrirá un menú desplegable que le permitirá seleccionar al estudiante e iniciar el proceso. (**Nota: Si solo tiene un(a) hijo(a), no es necesario realizar este paso.**)

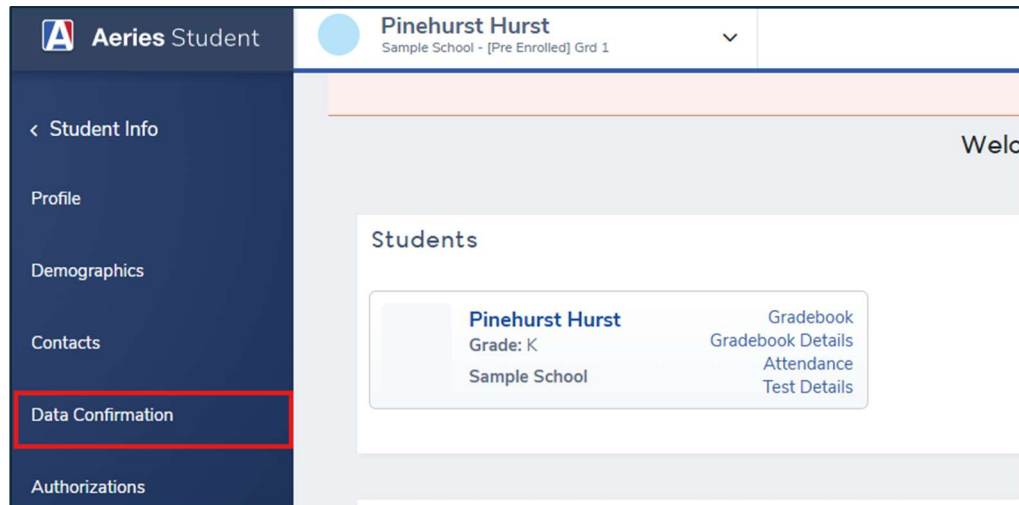


3. Haz clic en “**Student Info**” (“**Información del estudiante**”) en la columna de la izquierda.



Guía de confirmación de datos en Aeries para padres

4. Haga clic en **“Data Confirmation”** (**“Confirmación de datos”**) y continúe con **“Part One - Family Information”** (**“Parte uno - Información familiar”**).



Primera parte - Información familiar:

1. Lea y responda la primera pregunta: **“Seleccione si al menos uno de los padres/tutores de este estudiante está en servicio activo en las Fuerzas Armadas de los Estados Unidos”**.

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 (full-time military duty status in the **ACTIVE** uniformed service of the United States, including members of the Army, Air Force, Marines, Navy, Coast Guard, National Guard and the State Reserves on **ACTIVE** duty orders).

☒ No, this student does **NOT** have a PARENT/GUARDIAN who is active in the United States Armed Forces.

Guía de confirmación de datos en Aeries para padres

2. Seleccione una de las opciones en pantalla que mejor describa la información del lugar donde vive el estudiante en “**Family Information/ Housing Questionnaire**” (“**Información familiar/Cuestionario de vivienda**”).

Family Information/Housing Questionnaire

For HELP completing this step or for more information, [CLICK HERE](#)

SELECT one of the following options to complete your Residency Information

WHEN FINISHED: Click on "Confirm and Continue"

☐ Temporary Shelters or Assisted Living: A residence provided for individuals who would otherwise have nowhere to sleep or provided in emergency situations (family shelter, domestic violence shelter, youth shelter, FFEMA trailer)

☐ Hotels/Motels: A temporary residence due to loss of housing, economic hardship, natural disaster, or similar reason.

☐ Doubled Up Housing: A living situation where a family is renting or sharing a house with others (loss of housing, economic hardship, lack of adequate housing). This may be a short term or long term housing situation.

☐ Temporarily Unsheltered: Living in a car, park, campground, abandoned building, bus station, or any other dwelling that offers shelter but is not adequate housing.

☒ Living in a single-home residence that is permanent

3. Una vez que haya respondido las dos preguntas, en la columna de la izquierda debajo de “**Final Data Confirmation**” (“**Confirmación de datos finales**”), haga clic en “**Confirm and Continue**” (“**Confirmar y continuar**”) y pase a “**Part Two - Income**” (“**Segunda Parte - Ingresos**”).

8 Authorizations

9 Final Data Confirmation

Confirm and Continue

Guía de confirmación de datos en Aeries para padres

Segunda parte: Ingresos

1. Lea y responda las preguntas que aparecen en la sección “**Income Information**” (“**Información sobre ingresos**”). “**How many people are in your household?**” (“**¿Cuántas personas viven en tu hogar?**”)

Income Information

Ocean View School District continues to provide students with exemplary programs and services. Completing this Income Survey may allow the District to receive additional program funding. The information will be kept confidential. If you have questions about what to include in your household size or total monthly household income, [click here](#).

How many people are in your household?

☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ More
----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	-------------------------------

2. Lea y seleccione la respuesta que mejor describa sus ingresos brutos mensuales.
(**Nota: Los ingresos brutos son las ganancias antes de descontar los impuestos y retenciones**).

What is your total GROSS monthly household income (Gross Income is earnings before taxes and withholdings)? If you are not sure what your household monthly income is, you may calculate it using the following:

- Gross Annual pay divided by 12
- If paid twice per month, multiply gross pay/income by 2
- If paid bi-weekly (every two weeks), multiply gross pay/income by 26, then divide by 12
- If paid weekly, multiply gross pay/income by 52, then divide by 12

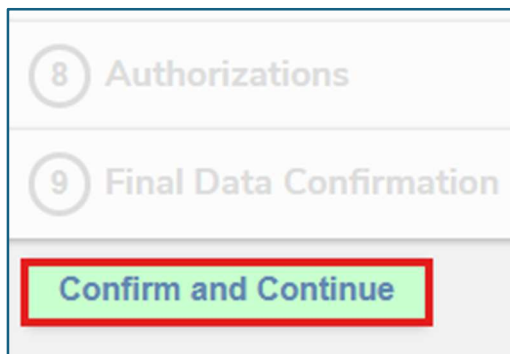
For help converting to Monthly Gross pay/Monthly income, [click here](#)

Add all of the monthly income of all household members to determine your total monthly household income.

☐ \$3483 or less
☐ \$3484 - \$4957
☐ \$4958 or greater

Guía de confirmación de datos en Aeries para padres

- Una vez que haya respondido las dos preguntas en la columna de la izquierda, debajo de **“Final Data Confirmation”** (**“Confirmación de datos finales”**), haga clic en **“Confirm and Continue”** (**“Confirmar y continuar”**) y pase a **“Part Three - Student”** (**“Tercera Parte - Estudiante”**). (Nota: Verifique que su información de ingresos sea correcta; no podrá realizar cambios una vez que haga clic en **“Confirm and Continue”** [**“Confirmar y continuar”**]).



Tercera parte – Estudiante

- Revise la información demográfica de su hijo(a) y asegúrese de que esté actualizada. Si **no** es necesario realizar ningún cambio, **continúe con el paso N.º 4**.

Student Information

The "Primary Phone" below will ONLY receive automated EMERGENCY notifications and office phone calls. Please follow the directions in [Step 4: Contacts](#) to add this phone number to your contact record.

1. If updates are needed, CLICK below on "Change" to UPDATE your child's information

2. CLICK on "Save" after any updates have been made

NOTE: ADDRESS CHANGES

If your address has changed, TAKE 2 proofs of residency to the school (rental contract, property tax receipt, government agency mail, gas, electric, or water bill)

WHEN FINISHED: Click on "Confirm and Continue"

Student Demographics		
		Notes
Mailing Address	17200 Pinehurst Ln Huntington Beach CA 92647	Changes to this information will NOT be saved in the system. Instead, the new information will be emailed to the school and the school will contact you for additional information.
Residence Address (if different than Mailing Address)	17200 Pinehurst Ln Huntington Beach CA 92647	Changes to this information will NOT be saved in the system. Instead, the new information will be emailed to the school and the school will contact you for additional information.
Primary Phone	(999) 999-9999	

[Change](#)

Guía de confirmación de datos en Aeries para padres

2. **Opcional: Si necesita realizar cambios** en la página de datos demográficos de su hijo(a), haga clic en el botón **“Change”** (**“Cambiar”**) que se encuentra debajo de la pestaña **“Student Demographics”** (**“Datos demográficos del estudiantes”**).

Student Information

The "Primary Phone" below will ONLY receive automated EMERGENCY notifications and office phone calls. Please follow the directions in [Step 4: Contacts](#) to add this phone number to your contact record.

1. If updates are needed, CLICK below on "Change" to UPDATE your child's information

2. CLICK on "Save" after any updates have been made

NOTE: ADDRESS CHANGES

If your address has changed, TAKE 2 proofs of residency to the school (rental contract, property tax receipt, government agency mail, gas, electric, or water bill)

WHEN FINISHED: Click on "Confirm and Continue"

Student Demographics		
		Notes
Mailing Address	17200 Pinehurst Ln Huntington Beach CA 92647	Changes to this information will NOT be saved in the system. Instead, the new information will be emailed to the school and the school will contact you for additional information.
Residence Address (if different than Mailing Address)	17200 Pinehurst Ln Huntington Beach CA 92647	Changes to this information will NOT be saved in the system. Instead, the new information will be emailed to the school and the school will contact you for additional information.
Primary Phone	(999) 999-9999	

[Change](#)

3. **Opcional: Haga clic en los campos para editar la información.** Una vez que haya terminado de editar, haga clic en **“Save”** (**“Guardar”**) para actualizar la información.

Student Information

The "Primary Phone" below will ONLY receive automated EMERGENCY notifications and office phone calls. Please follow the directions in [Step 4: Contacts](#) to add this phone number to your contact record.

1. If updates are needed, CLICK below on "Change" to UPDATE your child's information

2. CLICK on "Save" after any updates have been made

NOTE: ADDRESS CHANGES

If your address has changed, TAKE 2 proofs of residency to the school (rental contract, property tax receipt, government agency mail, gas, electric, or water bill)

WHEN FINISHED: Click on "Confirm and Continue"

Student Demographics		
		Notes
Mailing Address	17200 Pinehurst Ln City: Huntington Be State: CA Zip: 92647 -	Changes to this information will NOT be saved in the system. Instead, the new information will be emailed to the school and the school will contact you for additional information.
Residence Address (if different than Mailing Address)	17200 Pinehurst Ln City: Huntington Be State: CA Zip: 92647 -	Changes to this information will NOT be saved in the system. Instead, the new information will be emailed to the school and the school will contact you for additional information.
Primary Phone	(999) 999-9999	

[Save](#) [Cancel](#)

Guía de confirmación de datos en Aeries para padres

4. Una vez que haya verificado la página de “Datos demográficos” del estudiante, en la columna izquierda, debajo de “**Final Data Confirmation**” (“**Confirmación de datos finales**”), haga clic en “**Confirm and Continue**” (“**Confirmar y continuar**”) y proceda a la “**Part Four - Contacts**” “**Cuarta Parte - Contactos**”.

8 Authorizations

9 Final Data Confirmation

Confirm and Continue

Cuarta parte – Contactos

1. Revise y verifique los datos de contacto de su hijo(a). **Si no necesita** actualizar ninguna información de contacto, **siga al paso N.º 8. (Nota: Cada estudiante debe tener un contacto registrado con la designación de P1/Padre o Tutor 1).**

Contacts		+ Add
 Parent Test Mother  17200 Pinehurst Lane, Huntington Beach CA 92647  Jsmith@ovsd.com  (999) 999-9999  Lives With Record Type: Parent OR Guardian 1 (P1) Ed Level: Some College (3) More Info  Last Updated: 4/7/2026 9:46 AM		
 Test Test Father  17200 Pinehurst Lane, Huntington Beach 92647  (999) 999-9999 Record Type: Parent OR Guardian 2 (P2) Ed Level: High School Graduate (2)  Last Updated: 4/7/2026 9:47 AM		

Guía de confirmación de datos en Aeries para padres

2. **Agregar contacto (opcional):** Si necesita **agregar un contacto** a la página de contactos de su hijo(a), haga clic en el botón **“Add”** (**“Agregar”**) en la esquina derecha.

Contacts

Parent Test
Mother

17200 Pinehurst Lane, Huntington Beach
CA 92647

Jsmith@ovsd.com

(999) 999-9999

Lives With

Record Type: Parent OR Guardian 1 (P1)

Ed Level: Some College (3)

More Info

Last Updated: 4/7/2026 9:46 AM

Test Test
Father

17200 Pinehurst Lane, Huntington Beach
92647

(999) 999-9999

Record Type: Parent OR Guardian 2 (P2)

Ed Level: High School Graduate (2)

Last Updated: 4/7/2026 9:47 AM

3. **Agregar contacto (opcional):** En la pantalla **“Edit Contact”** (**“Editar contacto”**), llene las casillas correspondientes como se indica. Una vez hecho esto, haga clic en **“Save”** (**“Guardar”**) para agregar el nuevo contacto.

Edit Contact

Last Name

First Name

Suffix

Mailing Name

Test

Grandmother

Lives With?

Address

City

State

Zip Code

ZipExt

Y

17200 Pinehurst Ln

Huntington Beach

CA

92647

Relationship

Primary Contact

Record Type

Automated Notification Preferences

Attendance Notification

Mail Tag

Enrolled the Student

Grandmother

Emergency Announce

N

Telephone

Work Phone

Extn

Mobile Phone

CorrLng

Ed Level

(999) 999-9999

Birthdate

TB Test Status

TB Test Expiration

Fingerprint Status

Fingerprint Date

Email Address

Employer Name

Occupation

User 1

User 2

User 3

User 4

User 5

User 6

User 7

User 8

Additional Contact 1

Additional Contact 2

Additional Contact 3

Additional Contact 4

Save

Cancel

Guía de confirmación de datos en Aeries para padres

4. **Edición opcional de contactos:** Si necesita **editar un contacto** en la página de contactos de su hijo(a), haga clic en el botón para "**Editar/Icono de un lápiz**" en la esquina izquierda del contacto que desea editar.

Contacts

Add

Parent Test Mother

17200 Pinehurst Lane, Huntington Beach CA 92647

Jsmith@ovsd.com

(999) 999-9999

Lives With

Record Type: Parent OR Guardian 1 (P1)

Ed Level: Some College (3)

More Info

Last Updated: 4/7/2026 9:46 AM

Test Test Father

17200 Pinehurst Lane, Huntington Beach 92647

(999) 999-9999

Record Type: Parent OR Guardian 2 (P2)

Ed Level: High School Graduate (2)

Last Updated: 4/7/2026 9:47 AM

5. **Edición opcional de contacto:** En la pantalla "**Edit Contact**" ("**Editar contacto**"), haga clic y edite la casilla correspondiente. Una vez que haya terminado de editar, haga clic en "**Save**" ("**Guardar**") para actualizar el contacto. (**Nota: Las casillas resaltadas solo muestran los cambios realizados en el registro**).

Edit Contact

Last Name

First Name

Suffix

Mailing Name

Test

Test

Test Test

Lives With?

Address

City

State

Zip Code

ZipExt

N

17200 Pinehurst Lane

Huntington Beach

92647

Relationship

Primary

Record Type

Automated Notification

Attendance

Mail

Enrolled the

Father

Contact

Parent OR Guardian 2

General and Emergen

Preferences

Notification

Tag

Student

Telephone

Work Phone

Extn

Mobile Phone

CorrLug

Ed Level

(999) 999-9999

(001) 999-9999

00

2

Birthdate

TB Test Status

TB Test Expiration

Fingerprint Status

Fingerprint Date

Email Address

Employer Name

Occupation

asmith@ovsd.com

User 1

User 2

User 3

User 4

User 5

User 6

User 7

User 8

Additional Contact 1

Additional Contact 2

Additional Contact 3

Additional Contact 4

Save

Cancel

Delete

Guía de confirmación de datos en Aeries para padres

6. **Eliminar contacto (opcional):** Si necesita **eliminar un contacto** de la página de contactos de su hijo(a), haga clic en el botón para "**Editar/Icono de lápiz** " en la esquina izquierda del contacto que desea eliminar.

Contacts + Add



Parent Test Mother
📍 17200 Pinehurst Lane, Huntington Beach CA 92647
✉️ Jsmith@ovsd.com
☎️ (999) 999-9999
[More Info](#) 🕒 Last Updated: 4/7/2026 9:46 AM



Test Test Father
📍 17200 Pinehurst Lane, Huntington Beach 92647
☎️ (999) 999-9999
Record Type: Parent OR Guardian 2 (P2)
Ed Level: High School Graduate (2)
🕒 Last Updated: 4/7/2026 9:47 AM

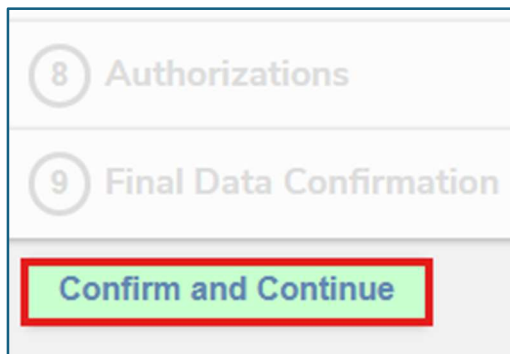
7. **Eliminar contacto (opcional):** En la pantalla "**Edit Contact**" ("**Editar contacto**"), haga clic en "**Delete**" ("**Eliminar**") en la esquina inferior derecha de la pantalla. Confirme que desea eliminar el contacto registrado.

Edit Contact

Last Name		First Name		Suffix	Mailing Name	
Test		Grandmother				
🏠 Lives With?	📍 Address	City		State	Zip Code	ZipExt
Y ▼	17200 Pinehurst Ln	Huntington Beach		CA	92647	
★ Primary Relationship	Contact	Record Type	Automated Notification Preferences	Attendance Notification	✉️ Mail Tag	Enrolled the Student
Grandmother ▼			Emergency Announce ▼	N ▼		
☎️ Telephone	💼 Work Phone	Extn	📱 Mobile Phone	📶 CorrLng	Ed Level	
(999) 999-9999						
📅 Birthdate	📅 TB Test Status	📅 TB Test Expiration	📅 Fingerprint Status	📅 Fingerprint Date		
✉️ Email Address		Employer Name		Occupation		
User 1	User 2	User 3	User 4	User 5	User 6	User 7
Additional Contact 1			Additional Contact 2			
Additional Contact 3			Additional Contact 4			
Save Cancel Delete						

Guía de confirmación de datos en Aeries para padres

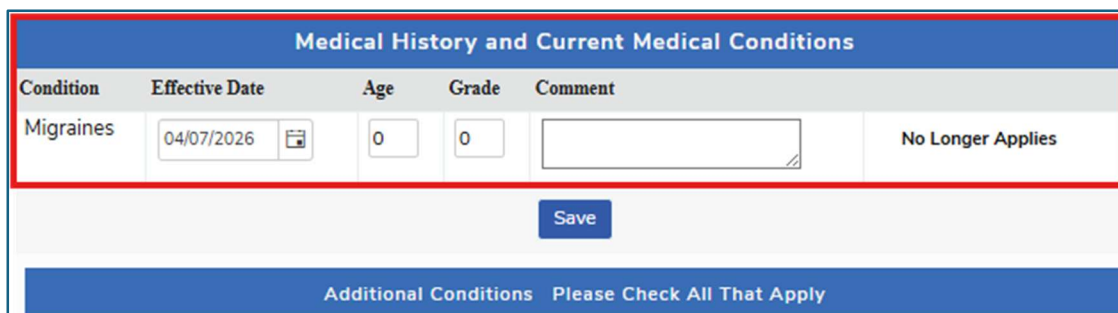
- Una vez que haya verificado la página de “**Contactos**” del estudiante, en la columna de la izquierda debajo de “**Final Data Confirmation**” (“**Confirmación de datos finales**”) haga clic en “**Confirm and Continue**” (“**Confirmar y continuar**”) y proceda a la “**Part Five – Medical History**” (“**Quinta Parte: historial médico**”).



The screenshot shows a sidebar with two options: '8 Authorizations' and '9 Final Data Confirmation'. Below these is a button labeled 'Confirm and Continue' which is highlighted with a red rectangular border.

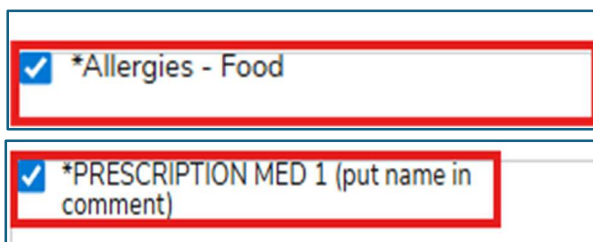
Quinta parte: Historial médico

- Revise el “**Medical History and Current Medical Conditions**” (“**Historial médico y afecciones médicas actuales**”) de su hijo(a). Si no es necesario realizar **cambios**, continúe con el paso N.º5. (**Nota: A partir del año escolar 2026-2027, no es necesario indicar su seguro médico en esta sección. Consulte la “Sexta Parte: Información del seguro”**).



The screenshot shows the 'Medical History and Current Medical Conditions' form. It features a table with the following columns: Condition, Effective Date, Age, Grade, and Comment. The first row contains the text 'Migraines', the date '04/07/2026', the age '0', the grade '0', and a comment box. To the right of the comment box is a button labeled 'No Longer Applies'. Below the table is a 'Save' button. At the bottom of the form, there is a section titled 'Additional Conditions Please Check All That Apply'.

- Agregar afecciones médicas:** Para agregar una afección médica, historial médico o receta, seleccione la casilla correspondiente de la lista proporcionada.



The screenshot shows the 'Additional Conditions' section. It contains two checkboxes, both of which are checked. The first checkbox is labeled '*Allergies - Food' and the second is labeled '*PRESCRIPTION MED 1 (put name in comment)'. Both checkboxes are highlighted with red rectangular borders.

Guía de confirmación de datos en Aeries para padres

3. **Agregar afecciones médicas:** Una vez seleccionadas, se le pedirá que coloque la fecha de inicio, la edad y el grado escolar. Luego, incluya un comentario que describa la afección o el nombre de la receta. Haga clic en “**Save**” (“**Guardar**”) para agregar la afección. (**Nota: Si indicó que su hijo(a) tiene una afección que está marcada con un asterisco, al final de este registro encontrará un enlace a los formularios correspondientes. Estos formularios deben ser llenados por el padre/madre/tutor y el médico para determinar los procedimientos o medicamentos que se administrarán en la escuela).**

☒ *Allergies - Food
 Effective Date: 04/07/2026
 Age: 0
 Grade: 0
 Comment: Severe peanut allergy.

☐ Depression ☐ Tourettes

☐ *Allergies - Insect ☐ *Diabetes Type 1 ☐ Transplants

☐ Anxiety ☐ *Diabetes Type 2 ☐ Other Mental Health

☐ *Asthma - Exercise Induced ☐ Eating Disorder ☐ Other Condition Not Listed

☐ *Asthma - Illness Induced ☐ Heart Condition ☐ *PRESCRIPTION MED 1 (put name in comment)

☐ *Asthma - Seasonal ☐ Immune Disorders ☐ *PRESCRIPTION MED 2 (put name in comment)

☐ Autism Spectrum ☐ Muscular Dystrophy ☐ *PRESCRIPTION MED 3 (put name in comment)

Save

4. **Eliminar afecciones médicas:** Para eliminar una afección médica, un historial médico o una receta, haga clic en “No Longer Applies” (“Ya no aplica”). A continuación, haga clic en “Save” (“Guardar”) para eliminar la afección o el historial médico.

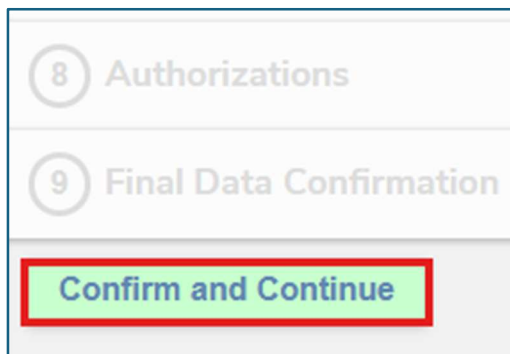
Medical History and Current Medical Conditions					
Condition	Effective Date	Age	Grade	Comment	
Migraines	04/07/2026	0	0		No Longer Applies
*Allergies - Food	04/07/2026	0	0	Severe peanut allergy.	No Longer Applies

Save

Additional Conditions Please Check All That Apply

Guía de confirmación de datos en Aeries para padres

- Una vez que haya verificado la sección de “**Medical History and Current Medical Conditions**” (“**Historial médico y las condiciones médicas actuales**”) del estudiante, en la columna de la izquierda debajo de “**Final Data Confirmation**” (“**Confirmación de datos finales**”) haga clic en “**Confirm and Continue**” (“**Confirmar y continuar**”) y proceda a la “**Part Six – Insurance Info**” (“**Sexta Parte: información sobre su seguro**”).



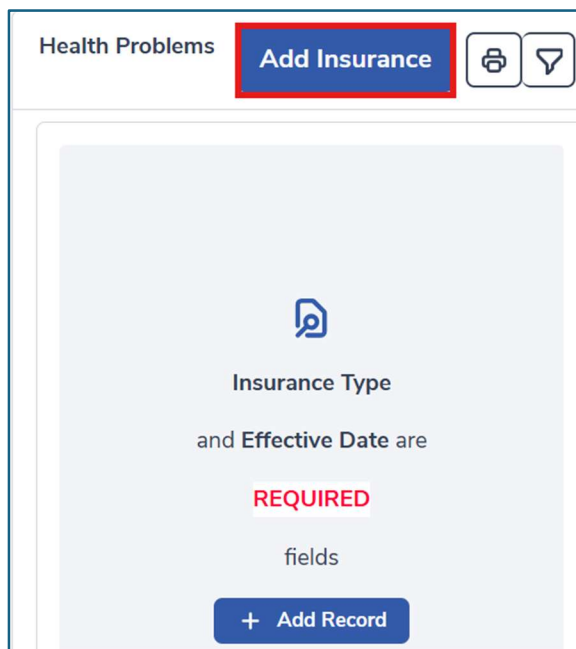
Sexta parte: Información sobre su seguro

- Verifique que la información sobre su seguro esté actualizada. Si **no** es necesario realizar ningún cambio, **continúe con el paso N.º 8**.

Unitedhealthcare (UHC) - Medical					Active
☐	Insurance Type	Primary Coverage	Effective Date	Expiration Date	
	M - Medical	Yes	4/7/2026	--	
	Insurance Carrier	Carrier Name	Policy Number	Member ID	
	UHO - Unitedhealthcare...	--	--	--	

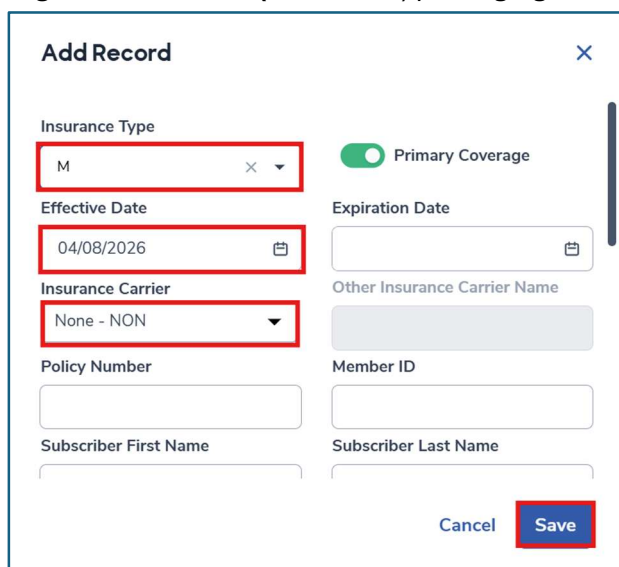
Guía de confirmación de datos en Aeries para padres

2. **Agregar seguro:** Si es la primera vez que llena la Confirmación de datos de los padres, deberá agregar la información de su seguro. Haga clic en **“Add Insurance”** (**“Agregar seguro”**) en la parte superior de la pantalla.



The screenshot shows a web interface with a header bar containing the text "Health Problems" and a blue button labeled "Add Insurance" which is highlighted with a red rectangular box. To the right of the button are two icons: a printer and a filter. Below the header is a large light blue area with a document icon, the text "Insurance Type and Effective Date are REQUIRED fields", and a blue button at the bottom labeled "+ Add Record".

3. **Agregar seguro:** En la pantalla **“Add Record”** (**“Agregar registro”**), complete el registro de su seguro lo mejor que pueda. Hay tres casillas obligatorias: **“Insurance Type”** (**“Tipo de seguro”**), **“Effective Date”** (**“Fecha de vigencia”**) e **“Insurance Carrier”** (**“Compañía aseguradora”**). En **“Tipo de seguro”**, escriba **“M”** para que se complete automáticamente **“Medical”** (**“Seguro Médico”**), para **“Fecha de vigencia”** coloque la fecha de hoy; y para **“Compañía aseguradora”**, seleccione su compañía aseguradora o **“None - NON”** (**“Ninguna”**). Luego, haga clic en **“Save”** (**“Guardar”**) para agregar su seguro.



The screenshot shows the "Add Record" form. It has a title bar with "Add Record" and a close button. The form contains several fields: "Insurance Type" with a dropdown menu showing "M" (highlighted with a red box), "Effective Date" with a date input showing "04/08/2026" (highlighted with a red box), "Insurance Carrier" with a dropdown menu showing "None - NON" (highlighted with a red box), "Primary Coverage" with a toggle switch, "Expiration Date" with a date input, "Other Insurance Carrier Name" with a text input, "Policy Number" with a text input, "Member ID" with a text input, "Subscriber First Name" with a text input, and "Subscriber Last Name" with a text input. At the bottom right are "Cancel" and "Save" buttons, with the "Save" button highlighted with a red box.

Guía de confirmación de datos en Aeries para padres

4. **Edición del seguro:** Para editar su registro de seguro, haga clic en el icono de "Editar/Lápiz " en la esquina superior derecha del registro.

Unitedhealthcare (UHC) - Medical					Active
☐	Insurance Type M - Medical	Primary Coverage Yes	Effective Date 4/8/2026	Expiration Date --	
	Insurance Carrier UHO - Unitedhealthcare...	Carrier Name --	Policy Number --	Member ID --	

5. **Edición del seguro:** Una vez que esté en la pantalla de "Edit Record" ("Editar Registro"), puede realizar cambios o agregar información al registro. Luego, haga clic en "Save" ("Guardar") para actualizar el registro. (Nota: La casilla resaltada indica un cambio en el registro).

Edit Record

Insurance Type
Medical

Effective Date
04/08/2026

Insurance Carrier
Unitedhealthcare (UHC) -...

Policy Number

Subscriber First Name

☒ Primary Coverage

Expiration Date
01/01/2028

Other Insurance Carrier Name

Member ID

Subscriber Last Name

Delete

Cancel

Save

Guía de confirmación de datos en Aeries para padres

6. **Eliminar seguro:** Para eliminar un registro de seguro, haga clic en el **icono de "Editar/Lápiz"** en la esquina superior derecha del registro.

Unitedhealthcare (UHC) - Medical					Active
☐	Insurance Type M - Medical	Primary Coverage Yes	Effective Date 4/8/2026	Expiration Date --	
	Insurance Carrier UHO - Unitedhealthcare...	Carrier Name --	Policy Number --	Member ID --	

7. **Eliminar seguro:** Haga clic en **"Delete"** (**"Eliminar"**) en la esquina inferior izquierda de la pantalla **"Edit Records"** (**"Editar Registro"**). A continuación, confirme la eliminación del registro para borrarlo.

Edit Record

Insurance Type
Medical

Effective Date
04/08/2026

Insurance Carrier
Unitedhealthcare (UHC) -...

Policy Number

Subscriber First Name

☒ Primary Coverage

Expiration Date
01/01/2028

Other Insurance Carrier Name

Member ID

Subscriber Last Name

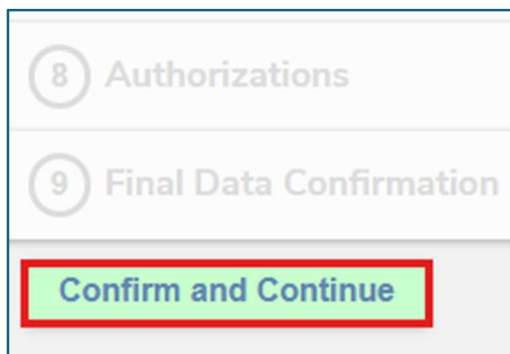
Delete

Cancel

Save

Guía de confirmación de datos en Aeries para padres

- Una vez que haya verificado la información del estudiante en la página “**Insurance Info**” (“**Información sobre su seguro**”) en la columna de la izquierda, debajo de “**Final Data Confirmation**” (“**Confirmación de datos finales**”), haga clic en “**Confirm and Continue**” (“**Confirmar y continuar**”). Continúe con “**Part Seven – Documents**” (“**Séptima Parte – Documentos**”).



Séptima parte – Documentos

- Abra y lea todos los documentos en la página “**Documents**” (“**Documentos**”).

A screenshot of a web page titled 'Documents'. It contains several green boxes, each representing a document or acknowledgment that is required. Each box has a red icon, a title, a status ('*Required'), a checkbox, and a statement of understanding. The documents listed are: 'Annual Notice by Feeder District', 'Student Health Insurance', 'Student Device Check Out', 'ACCEPTABLE USE AGREEMENT FOR ELECTRONIC RESOURCES', 'Campus Security', 'Cell Phone Policy Acknowledgement', and 'eSports Code of Conduct'. All checkboxes are marked with a checkmark, indicating they have been read and understood.

Guía de confirmación de datos en Aeries para padres

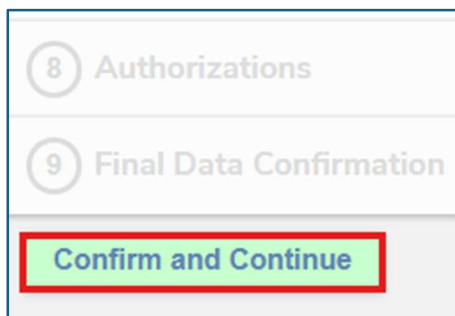
Policy Documents - General	
 ANNUAL NOTIFICATION TO PARENTS/GUARDIANS/STUDENTS *Required ☒ I have read and understand the Annual Notification to Parents/Guardians/Students	
 Compulsory Education Law *Required ☒ I have read and understand the Compulsory Ed Law Notice	 SARB Letter *Required ☒ I have read and understand the SARB letter
 DANGEROUS OBJECTS AT SCHOOL *Required ☒ I have read and understand the Dangerous Objects at School document	 Library Agreement *Required English and Spanish ☒ I have read and understand the Library Book Agreement
 Integrated Pest Management *Required ☒ I have read and understand the information on Integrated Pest Management	
 Vista View School-Level Parental Involvement Policy *Required ☒ I have read and understand the School-Level Parental Involvement Policy	 Independent Study Agreement *Required ☒ I have read and understand the Independent Study Agreement

Medical Documents
 Student Health Insurance *Required ☒ I have read and understand the information on Student Health Insurance enrollment
 Medi-CAL and Covered California Enrollment Information *Required ☒ I have read and understand the document on how to enroll in Medi-Cal and Covered California

Handbooks
 Vista View Handbook *Required English - Read the handbook and click on the box to verify it has been read. ☒ I have read and understand the Handbook

Guía de confirmación de datos en Aeries para padres

- Una vez que haya abierto y leído todos los documentos, aparecerán en verde. Esto le permitirá continuar. En la columna de la izquierda, debajo de **“Final Data Confirmation”** (**“Confirmación de datos finales”**), haga clic en **“Confirm and Continue”** (**“Confirmar y continuar”**) y proceda con **“Part Eight – Authorizations”** (**“Octava Parte – Autorizaciones”**).



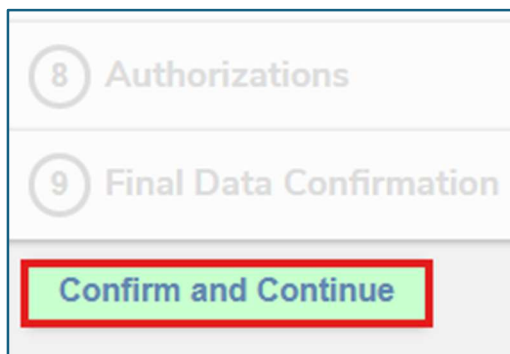
Octava parte – Autorizaciones

- Lea toda la información en la página de **“Authorizations and Prohibitions”** (**“Autorizaciones y Prohibiciones”**). Marque **“Consent”** (**“Autorizo”**) o **“No Consent”** (**“No Autorizo”**) para cada opción.

Description	Status
SCHOOL/DISTRICT PHOTO/VIDEO RELEASE Read above for a detailed explanation of choosing "Consent" or "No Consent" for the School/District Photo/Video Release. If you select "Consent" you hereby release and hold harmless the Ocean View School District and its authorized representatives from any and all actions, claims damages, costs of expenses, including attorney's fees, brought by the student and/or parent or guardian which relate to or arise out of any use of these recordings as specified. If you select "No Consent," your child WILL NOT BE INCLUDED in school yearbooks and memory books.	☒ Consent ☐ No Consent
OFFICIAL SCHOOL/DISTRICT SOCIAL MEDIA/WEBSITE/PUBLICATIONS AND OUTSIDE MEDIA RELEASE Read above for a detailed explanation of choosing "Consent" or "No Consent" for the OFFICIAL School/District Social Media/Website/Publications and Outside Media Release. If you select "Consent," you hereby release and hold harmless the Ocean View School District and its authorized representatives from any and all actions, claims damages, costs of expenses, including attorney's fees, brought by the student and/or parent or guardian which relate to or arise out of any use of these recordings as specified.	☒ Consent ☐ No Consent
EMERGENCY TREATMENT RELEASE I authorize such medical treatment as may be determined necessary by the physician/medical personnel in charge in case of emergency and I cannot be reached. I also acknowledge that local police, paramedics or other emergency personnel may be called in certain circumstances, in order to assure emergency treatment for my child.	☒ Consent ☐ No Consent
AERIES PARENT PORTAL (gradebook) EMAIL I would like to receive DAILY (Sunday - Friday) emails about my child's progress from the Aeries Parent Portal (attendance, upcoming assignments, recent assignments, etc.).	☒ Consent (Daily) ☐ No Consent
ELECTRONIC REPORT CARDS-NOT PRINTED I will use the Aeries Parent Portal (portal.ovsd.org) to view and/or print my child's report cards and no longer require the district to print and mail my child's progress reports or report cards. Report cards will be available to view online the same day they are processed.	☒ Consent (Electronic) ☐ No Consent (Mailed)
TEXTBOOK Access As part of our ongoing efforts to enhance the educational experience for our middle school students, we are reviewing our textbook distribution system and provide students and families with options for online and/or physical textbook access. Currently, we provide two sets of Math and History/Social Science textbooks per student, allowing them to keep one at home and have another for use in the classroom. To adapt to the changing landscape of education and take advantage of technological advancements, this year, we are offering families two options. We would like to provide the choice between: (1) Taking the physical copy of the textbooks to keep at home (2) Accessing the textbooks solely online from home. We believe offering this flexibility will cater to the diverse needs and preferences of our students and their families. If at any time you change your preference (from physical copy to online or from online to physical copy), please contact your school office manager. We are happy to accommodate the request. Please note, all students will continue to receive consumable books that students write in and utilize throughout the year. Please choose one of the following options: Physical Copy: I prefer my child to have a physical copy of the textbook to keep at home. Online: I prefer my child to access the textbook solely online from home.	☒ Physical Copy ☐ Online
2024 STATE TESTING RESULTS Your student's 2025 State Testing results will be available electronically unless otherwise indicated in this survey. Electronic - Through Aeries Parent Portal (will not be mailed home) Paper Copy - (will be mailed to the address on file)	☒ Electronic Only ☐ Paper (mailed)

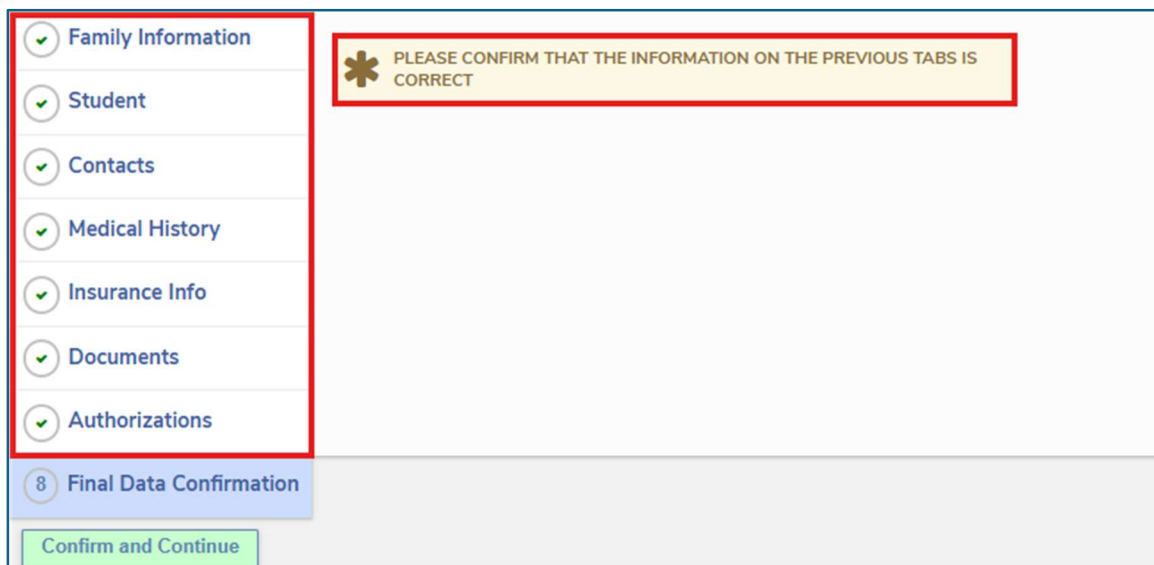
Guía de confirmación de datos en Aeries para padres

- Una vez que haya completado la página de “**Authorizations and Prohibitions**” (“**Autorizaciones y Prohibiciones**”), podrá continuar. En la columna de la izquierda debajo de “**Final Data Confirmation**” (“**Confirmación de datos finales**”), haga clic en “**Confirm and Continue**” (“**Confirmar y continuar**”) y proceda con “**Part Nine – Final Data Confirmation**” (“**Novena Parte – Confirmación final de datos**”).



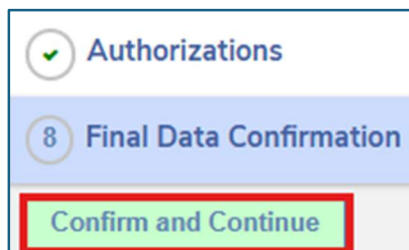
Novena parte – Confirmación final de datos

- En la pantalla “**Final Data Confirmation**” (“**Confirmación final de datos**”), podrá volver al inicio del proceso de confirmación de datos de los padres. Esto le permite verificar o editar la información enviada en las pestañas/pantallas anteriores, excepto la sección “**Income Information**” (“**Información de ingresos**”), que **se registra una sola vez y no se puede editar**.



Guía de confirmación de datos en Aeries para padres

- Una vez que haya confirmado su información, haga clic en **“Confirm and Continue”** (**“Confirmar y continuar”**) en la parte inferior de la columna de la izquierda, debajo de **“Final Data Confirmation”** **“Confirmación final de datos”**. Esto lo redirigirá a la **“Emergency Card”** (**“Tarjeta de emergencia”**) de su hijo(a).



- Verá una página de confirmación que Le felicitará por haber completado la Confirmación de los datos de los padres del estudiante. En esta página, desplácese hacia abajo y haga clic en **“Print New Emergency Card”** (**“Imprimir nueva Tarjeta de Emergencia”**).

CONGRATULATIONS

After clicking on "Print New Emergency Card" (below) and taking a signed copy of the Emergency Card/Verification Summary to your school's Registration Day, your Annual Verification of Enrollment will be complete!

For a list of school Registration Days, [click here](#)

If you indicated your child has certain medical conditions, please go to the website [OVSD Health Services](#) for the appropriate forms to be completed by the parent/guardian and doctor in order for procedures or medication to be provided at school.

EXPANDED LEARNING OPPORTUNITIES PROGRAM (ELOP)

Expanded Learning Opportunities Program (ELOP) provides free after school learning and enrichment programs for students in Transitional Kindergarten through 6th grade that qualify as foster youth, English learners or free and reduced lunch. The program focuses on developing the academic, social, emotional and physical needs and interests of students through hands-on, engaging learning experiences.

If you have not already done so, click on the link to access your survey to share your interest in having your student participate in After School ELOP. [Click Here](#)

FOOD & NUTRITION SERVICES

For the 2024-25 school year, the Ocean View School District is participating in both the California Universal Meals Program and Community Eligibility Provision (CEP). This allows all OVSD schools to provide BOTH a breakfast and lunch meal free of charge to all students. All meals served on our campuses during the school day meet state and federal nutrition requirements and regulations.

Please note that no meal applications are needed for students to receive free meals. Due to this, applications are not available. If your family needs a letter for income eligible services such as low cost utilities, low cost WiFi, reduced AP test fees, etc., please reach out to the Food and Nutrition Services Department at 714-847-2551 ext. 1452.

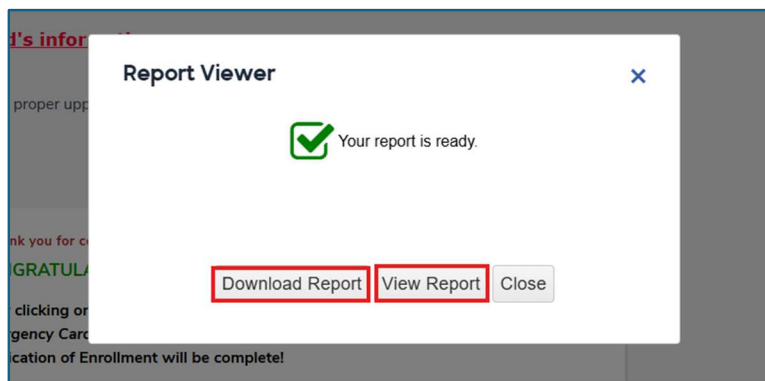
OCEAN VIEW SCHOOL DISTRICT INTEGRATED PEST MANAGEMENT

The Ocean View School District is working hard to bring modern pest management techniques and practices to our District. You can view our Integrated Pest Management (IPM) Plan and register for notifications of pesticide applications throughout the year. Please go to <http://ipm.ovsd.org> if you would like to register.

Print New Emergency Card

Guía de confirmación de datos en Aeries para padres

- Ahora puede hacer clic en **“Download Report”** (**“Descargar informe”**) para guardar el archivo en su dispositivo e imprimir la tarjeta de emergencia de su hijo(a). También puede hacer clic en **“View Report”** (**“Ver informe”**) e imprimirla desde su navegador web. (**Nota: Si no dispone de una impresora, la escuela del estudiante puede imprimir la tarjeta de emergencia**) .



- Después de imprimir la tarjeta de emergencia de su hijo(a), fírmela y llévela a la escuela el día de la inscripción. Si tiene más hijos, vaya nuevamente a la sección **“Beginning Aeries Parent Data Confirmation”** (**“Confirmación de datos en Aeries para padres”**) en la página 1.

Hurst, Pinehurst		Sample School	
2025-2026		4/9/2026	
Student Emergency Card			
Page 1			
Student Information			
Student ID	Last Name	First Name	Middle Name
999999	Hurst	Pinehurst	
Read Address		Student's Mobile	
17200 Pinehurst Ln		Huntington Beach, CA 92647	
Mailing Address		Student's Email	
17200 Pinehurst Ln		Huntington Beach, CA 92647	
Birth Place			
Parent/Guardian Information			
Parent Test		Primary Phone (999) 999-9999	
Language: English		Primary Contact 1:	
		Primary Contact 2:	
Emergency Contacts			
Parent Test (lives with)		Mobile Phone	Code Parent OR Guardian 1
Mother		(999) 999-9999	
Test Test		Mobile (1) 999-9999	Code Parent OR Guardian 2
Father		Phone (999) 999-9999	
samth@ovsd.com			
Siblings Information			
Medical Information			
Health Problem	Grade	Age	Date
*Allergies - Food	K	0	04/07/2026
Parent Comment: Severe peanut allergy			
Migraines	K	0	04/07/2026
*PRESCRIPTION MED 1 (put name in c			
	K	0	04/07/2026
Insurance Information			
Insurance Type:	Insurance Carrier:	Group Number:	Policy Number:
M - Medical			Effective Date: 4/8/2026
Member ID:	Primary Coverage:	Medicaid (Medi-Cal)?	Benefits ID:
	Yes	No	Provider Name:
Comments:			
Authorizations			
Authorization Type	Authorization Code	Date	Status
5 Photo/Video Release	SR SCHOOL/DISTRICT PHOTO/VIDEO RELEASE	04/08/2026	04/08/2026 Consent
5 Photo/Video Release	FR OFFICIAL SCHOOL/DISTRICT SOCIAL MEDIA/WEBSITE/PUBLICATIONS AND OUTSIDE MEDIA RELEASE	04/08/2026	04/08/2026 Consent
6 Report Cards	RC ELECTRONIC REPORT CARDS-NOT Printed	04/08/2026	04/08/2026 Consent
7 Health Authorizations	ER EMERGENCY TREATMENT RELEASE	04/08/2026	04/08/2026 Consent
8 Electronic Communication	PN AERIES PARENT PORTAL (gradebook) EMAIL	04/08/2026	04/08/2026 Consent
8 Electronic Communication	TB TEXTBOOK Access	04/08/2026	04/08/2026 Consent
8 Electronic Communication	ST 2024 STATE TESTING RESULTS	04/08/2026	04/08/2026 Consent
Hurst, Pinehurst - 999999			
Sample School			
Page 2			
VERIFICATION SUMMARY DOCUMENT			
Parent/Guardian Signature _____ Date _____			
Parent/Guardian Signature _____ Date _____			