#### Instructions to update Information on the Parent Portal

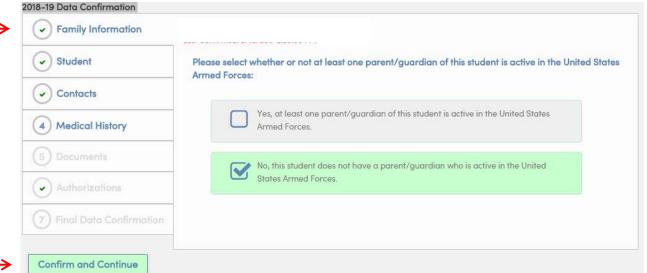
**Student Data Confirmation:** Prior to the start of each school year parents need to verify and update information, for each child, on the Parent Portal. During the data confirmation process, please review, verify and complete each section and make changes to the information when necessary. The data confirmation window will be open beginning <u>August 6, 2018</u>.

To start the process use the **<u>Click Here</u>** link from the homepage.

You have not yet completed the Student Data Confirmation Process. Click Here to confirm the information about your student.

**PLEASE NOTE:** If you need to make any changes once you have completed the data confirmation process, you may do so only during the open data confirmation window. Upon the next logon you will not see this link, you will need to select Data Confirmation from the "Student Info" tab.

1- "<u>FAMILY INFORMATION</u>" Tab: Please select whether or not at least one of the student's parent/guradian is active in the United States Armed Forces. Click on Confirm and Continue to proceed to the "Student" information tab.



**2** - "<u>STUDENT</u>" Tab: Please review the information in the data columns, this reflects the current information that the school has on file for your child. To update any information on this page, click "Change", make the necessary changes and click "Save". If no changes are necessary, click on Confirm and Continue to proceed to the "Contacts" tab.

Family Information	Last Confirmed: 8/18/2017	2:38:16 PM	
Student	Click "Change" to make changes to information on this page. Click "Save" when complete.		
		Student Demographics	
		Notes	
0	Mailing Address	Changes to this information will NOT be saved in the system.	
4 Medical History		Instead, the new information will be emailed to the school and th school will contact you for additional information.	
	Residence		
5 Documents	Address (if different than	Changes to this information will NOT be saved in the system. Instead, the new information will be emailed to the school and th	
	Mailing	school will contact you for additional information.	
<ul> <li>Authorizations</li> </ul>	Address)		
	Primary Phone		
7) Final Data Confirmation	Student's Mobile		
		Change	
Confirm and Continue		Change	

Instructions to update Information on the Parent Portal

**3** - "<u>CONTACTS</u>" **Tab:** Please review the information in the data columns. If no changes are necessary, you may move on to the "Medical History" tab by clicking on "Confirm and Continue." If you need to update any of the information, click "Change" to make corrections to the existing contacts, click "Add" to add a new contact, or click "Delete" to remove a contact.

Family Information     Student     Contacts	Please enter P on "Change" to	o make corrections to exi	Nember or Emergency Contact a	ind indicate relationship to student: Clicl I a new contact, or click on "Delete" to
4 Medical History	Select Record	d to Chanae		
5 Documents	Name	Address	Relation	
			Mother	
<ul> <li>Authorizations</li> </ul>			Grandmother	
			Father	
(7) Final Data Confirmation			Grandmother	
			Other Relationship	
Confirm and Continue	Change A	Add Delete		
			Contact Details	
				Notes

4. "<u>MEDICAL HISTORY</u>" Tab: Please fill out and check any that apply. If student needs to take medication, during the regular school day, please fill out Medication Authorization Form at school site and bring your students medication. Make all necessary changes click "Save" and click on Confirm and Continue to proceed to the "Documents" tab.

Family Information     Student     Contacts	If your student has medical condit If no medical conditions to report ( If your student needs to take medi section.	at this time, please chec	k the appropriate		ing Authorizations
4 Medical History		Medical History and	Current Medica	Conditions	
5 Documents	Condition	Effective Date	Age	Grade	Comment
Authorizations		$\longrightarrow$	Save		
7 Final Data Confirmation			onal Conditions eck All That Appl	у	
Confirm and Continue	<ul> <li>*No Medical Conditions to</li> <li>Allergy - Food</li> <li>Allergy - Insect Bite/Sting</li> <li>Allergy - Other</li> <li>Asthma</li> <li>Blood Disorder</li> </ul>	Diabetes	Epilepsy Seiz Sondition Visio		/Migraine
		<b>&gt;</b>	Save		

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**5** - "<u>DOCUMENTS</u>" **Tab**: Please download and review all of the documents. The Annual Notification document is in both English and Spanish. Click all the boxes to acknowledge receipt of these information and click on Confirm and Continue to proceed to the "Authorizations" tab.

<ul> <li>Contacts</li> <li>Medical History</li> <li>Documents</li> <li>Medical History</li> <li>Documents</li> <li>AUP English and Spanish Por la presente, confirmo de recibo la información sobre mis derechos, responsabilidades y protecciones. También atestiguo, bajo pena de perjurio, que soy</li> </ul>	
<ul> <li>Medical History</li> <li>Medical History</li> <li>Documents</li> <li>Authorizations</li> <li>Authorizations</li> <li>AUP English and Spanish Por la presente, confirmo de recibo la información sobre mis derechos, responsabilidades y protecciones. También atestiguo, bajo pena de</li> <li>I hereby acknowledge receipt of informative responsibilities and protections. I also at that I am a resident of the District, as pri- under an approved Inter-District Agreent</li> </ul>	
<ul> <li>Medical History</li> <li>Confirmo de recibo la información sobre mis derechos, responsabilidades y protecciones. También atestiguo, bajo pena de</li> <li>Medical History</li> <li>Medical History</li> <li>Información sobre mis derechos, responsabilidades y</li> </ul>	
Occuments     derechos, responsabilidades y protecciones. También atestiguo, bajo pena de     under an approved Inter-District Agreent protecciones. También	viously verified or attend
Authorizations     atestiguo, bajo pena de	
Final Data Confirmation     Final Data Confirmation     residente del Distrito,     como se verificó     previamente o que	
asisto bajo un Acuerdo Interdistrital aprobado.	
By selecting this box, you agree to al Attendance English and Spanish	the terms in the document.

**6** - "<u>AUTHORIZATIONS</u>" Tab: Please read the DIRECTORY INFORMATION RELEASE at the top of the page and check any box that applies. After you have made your selections, click "Save" and then click on Confirm and Continue to proceed to the "Final Data Confirmation" tab.

Family Information	Last Confirmed: 8/18/2017 2:40:34 PM	
Student	FAMILY EDUCATIONAL RIGHTS & PRIVACY ACT (FERPA): RELEASE OF DIRECTORY INFORMATION:	
Contacts	FERPA and Education Code 49061 & 49073 permit the District to disclose appropriately designated "directory information" without consent, unless you have advised SDUHSD that you do not want the pupil's directory information disclosed without your prior written consent. The District makes student directory information	
Medical History	available in accordance with state and federal laws. "Directory information" means one or more of the following items: pupil's name, address, telephone number, date of birth, email address, major field of study, participation in officially recognized activities and sports, weight and height of members of athletic teams, dates of attendance, degrees and awards received, and the most recent previous public or private school	
	attended by the pupil, which may be released to any agency or person with a legitimate educational interest, except private, profit-making entities other than employers, prospective employers, and representatives of the news media, including, but not limited to, newspapers, magazines, and radio and television stations. Names	
<ul> <li>Authorizations</li> </ul>	and addresses of seniors or terminating students may be given to public or private schools, colleges, employers and military recruiters. SDUHSD may post photographs, student work, and identification on the school district's websites and social media websites authorized and monitored by the school staff.	
7 Final Data Confirmation	Upon written request from the parent of a student age 17 or younger, the District will withhold student directory information. If a student is 18 or older or enrolled in an institution of post-secondary instruction and makes a written request, the District will withhold student directory information. Requests must be submitted within 30 calendar days of the receipt of this information.	
Confirm and Continue		
	Authorizations and Prohibitions	
	Description	St

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**7** - "<u>FINAL DATA CONFIRMATION</u>" Tab: To complete the data confirmation process click on "Submit Final Confirmation".

Note: After you click on "Submit Final Confirmation," you will be prompted to print an Emergency Card.

2018–19 Data Confirmation	
Family Information	Thank you for confirming the student data in the system. Please print your emergency card and take it to your student's school.
Student	Print New Emergency Card
Contacts	
Medical History	
Documents	
<ul> <li>Authorizations</li> </ul>	
Final Data Confirmation	

**EMERGENCY CARD**: Upon completion, print and sign the Emergency Card and return to your child's school. Emergency Cards must be on file with your child's school prior to the first day of school.

4

2018-19 Data Contirmation	
Family Information	Thank you for confirming the student data in the system. Please print your emergency card and take it to your student's school.
Student	Print New Emergency Card
<ul> <li>Contacts</li> </ul>	
Medical History	
Documents	
Authorizations	
Final Data Confirmation	
Contacts  Contacts  Medical History  Documents  Authorizations	

**DATA CONFIRMATION**: After you have completed the entire process, you will receive an email at your login email address confirming that the re-registration process is complete.

**<u>QUESTIONS OR TROUBLESHOOTING</u>**: Please contact your child's school site with any questions or concerns.