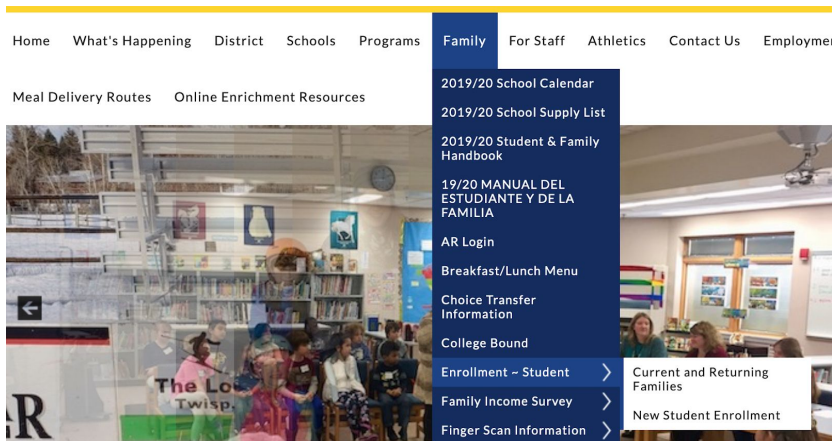# How to enroll your child at Tonasket Elementary School

Go to the School District Website at www.tonasket.wednet.edu

Click on Family - Enrollment - Student. If you have students already in the system click on current and returning students. If you are brand new to the school click on "new student enrollment", click on the new enrollment link.

For **NEW Families** you will get the screen below. Once you have submitted it, it will send link to your email to be able to log into skyward. If you do not have an email you can click that you don't have an email and it will give you a login password to use to log into skyward.

The skyward screen will appear. If you are **new**, you are going to make sure it says **enrollment access**. If you are a **current/returning family**, make sure that it says **family/student acces**s and log in with your family access ID and password. If you do not remember it, contact the school and they can look it up for you.
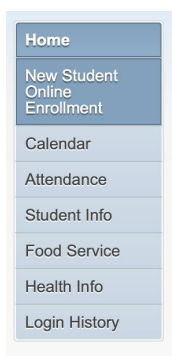
Current or Returning Families, once you log into family access, click on New Student Online Enrollment located on the left side of the page. As you go through the registration it will have some information already generated from the system. If the information needs to be changed, please update it.
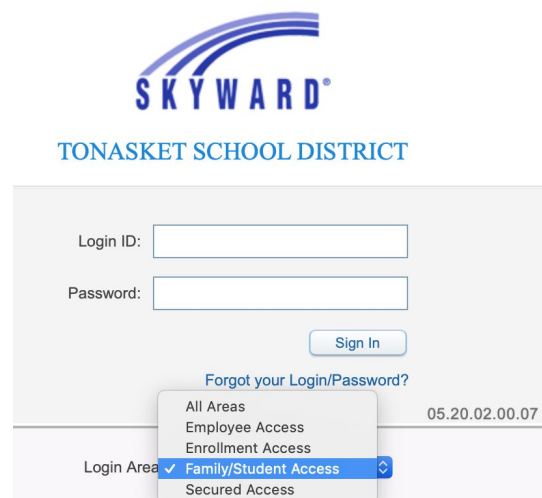
Step 1: Student Information: All * has to be filled out.
- Please put your child's legal name listed on the birth certificate.
- Please note that this is the student information so on the spots for second and third phone this is if they have a personal phone number that you want listed. There is a spot later for parents phone numbers under family information.
- On the federal/state ethnicity and the state race, click on the link and it will come up with a list of options for you to choose. Make sure that you save and close.
- On the previous school and address, either put in what preschool/school your child was at or put NA in the spot.
- Click first day of school (8/27/20)
- For expected grade level put in K2 for kindergarten. For Preschool you are going to do the age that your child is with the "P" in front, ie - "P4". All other grades, put what grade they are in or going into if it is registration for the next year.
- Please check the box for internet usage.

Once done with all of this information, click complete Step 1 and move to Step 2.

Step 2: Family/Guardian Information
 Please note that the first person and primary phone number will be the person that will be getting the school messenger phone calls and emails. Once this part is filled out there is a spot to click add another guardian to this family.

After you click that there is no other legal guardian at the address it will ask you if there are other guardians living in another address that need to be added. If you are a split family, this is where you put the other guardians information. This is not for grandparents.

When you are done, click complete step 2 and move to step 3.

Enter Information for the Primary Guardian and the Family this Student lives with

Enter Information for the Family this Student lives with

* Primary Phone: (__) [____] ☐ Should the District keep this number confidential?

* Preferred language for school communication: [____ ⌄]

☐ Print Hard Copy Report Cards

* Home Address:
House #: [____] Direction: [____] Street Name: [____] Apartment: [____]
P.O. Box: [____] Address 2: [____] City: [____] State: [__ ⌄] Zip Code: [____]
☐ Should the District keep this address confidential?

Mailing Address: (if different than home address)
House #: [____] Direction: [____] Street Name: [____] Apartment: [____]
P.O. Box: [____] Address 2: [____] City: [____] State: [__ ⌄] Zip Code: [____]

Enter Information for the Primary Guardian of the Family this Student lives with

* Last Name: [____] * First Name: [____] Middle Name: [____]

Name Suffix: [__ ⌄]

* Relationship to Child: [____ ⌄] Marital Status: [____ ⌄]

Cell Phone: [____] Work Phone: [____] Contact Email Address: [____]

* Preferred language for school communication.: [____ ⌄] Employer: [____]

Are there other Legal Guardians who live at this address?

[Yes, I want to Add another Legal Guardian who lives at this address] [No other Legal Guardians live at this Address]

Are there other Legal Guardians who live at a different address?

[Yes, I want to Add a Legal Guardian who lives at a Different Address] [No, Complete Step 2 and move to Step 3: Medical/Dental Information] [No, Complete Step 2 Only]

Step 3: Medical and Dental Information

This information is helpful but is not required. Please note that there will be a more indepth health questionnaire to fill out later in the registration paperwork. When done, click complete Step 3 and move to Step 4.

Step 3: Medical/Dental Information [Edit] [View Only] [Collapse Step]

Allergy/Medical Condition: [____]

Physician Last Name: [____] Physician First Name: [____] Physician Middle Name: [____]

Name Suffix: [__ ⌄] Name Prefix: [____ ⌄] Physician Phone: [____]

Dentist Last Name: [____] Dentist First Name: [____] Dentist Middle Name: [____]

Name Suffix: [__ ⌄] Name Prefix: [____ ⌄] Dentist Phone: [____]

Hospital: [____] Hospital Phone: [____]

[Complete Step 3 and move to Step 4: Emergency Contact Information] [Complete Step 3 Only]

Step 4: Emergency Contact Information

Emergency contacts are for anyone who you want to have on the list for us to contact when we cannot reach the parents first. For example, if your child is sick and you cannot be reached. The emergency contact would be able to be called and come pick up your child. You want them to be local, not a relative that lives far away.

Click on Yes, I want to add an emergency contact record. Put in the name of the person, phone number and a relationship to the child is helpful for when people are calling. Please put their legal name in, not a nickname so that we can match them up with the correct person in our system. Click the box if you are allowing that person to pick your child up from school.

If you have multiple people keep clicking to add them. When you are done, click no, Complete Step 4 and move to Step 5.

Step 4: Emergency Contact Information [Edit] [View Only] [Save] [Save and Collapse Step]

Enter the Information for Emergency Contact #1 [Remove this Emergency Contact]

* Last Name: [____ 👤⌄] * First Name: [____] Name Suffix: [__ ⌄]

☐ Is this contact allowed to pick up the student from school?

Primary Phone: [____] Cell Phone: [____] Work Phone: [____]

Relationship to Child: [____ ⌄] Relationship Comment: [____]

Do you have other Emergency Contacts to add for this student?

[Yes, I want to Add another Emergency Contact Record] [No, Complete Step 4 and move to Step 5: Immunization Information] [No, Complete Step 4 Only]

Step 5: Immunization Information

Please make sure that you read the note from the nurse regarding what is necessary before your child can start school. **You will need to enter your child's immunization records** in **the spots provided, along with turning in a printed CDC sheet with your signature on** it.

Please enter the dates your child received the following vaccinations- Dtap (5), Hepatitis B (3), Polio (4), Varicella (2), MMR (measles, mumps, rubella) (2). If your child has received other shots you can add them as well, however these are the ones that we are looking for before your child can start school.

Step 5: Immunization Information   Edit   View Only   Save   Save and Collapse Step

Instructions for entering Immunization Information
Enter Immunization Information for each Vaccine listed below.

Asterisk (*) denotes a required immunization

Immunization	Date 1	Date 2	Date 3	Date 4	Date 5	Date 6	Date 7
Hepatitis A							
Hepatitis B							
Haemophilus Influenzae type b							
Inactivated Polio Vaccine							
Measles							
Measles, Mumps, Rubella							
MMR + Varicella							
Mumps							
Basic Pneumococcal							
Rubella							
Tetanus, Diphtheria and Pertussis							
Varicella							

Complete Step 5 and move to Step 6: Requested Documents   Complete Step 5 Only

Once entered by you, click complete step 5 and move to step 6.

Step 6: Requested Documents

Please either upload documents here or make a copy and give it to the school. The immunization record would be the CDC form that needs to be printed and signed before your child can start school.

Step 6: Requested Documents   Edit   View Only   Save   Save and Collapse Step

Instructions for completing the Requested Documents
This step is optional. Forms only need to be submitted if applicable. Use the Browse buttons to locate a file to upload that corresponds to the description on the same line.

Birth Certificate: Choose File no file selected
Immunization Record: Choose File no file selected
Parenting Plan: Choose File no file selected
Restraining Order: Choose File no file selected

Complete Step 6 and move to Step 7: Additional District Forms   Complete Step 6 Only

Step 7: Additional District Forms

Each form needs to be opened, filled out and saved.

- Deny Photo Posting or Meal Finger Scan: If you DO NOT want your child's picture posted online or his/her finger scanned for going through the line for meals, sign the appropriate spots. Otherwise save and close.
- Housing Form: Please check the appropriate boxes, sign, save and close.
- Other Enrollment Questions: Please answer a variety of different questions. If you don't know what some of the programs are, then don't worry about it. Sign, save and close.
- Health Information: This is a more in depth form for you to give information to the school nurse.
- Chromebook Agreement: Each student is assigned an I-pad or a Chromebook for the school year. Please read the usage agreement and initial and sign where appropriate. Save and close.

Step 7: Additional District Forms   Edit   View Only   Save   Save and Collapse Step

Instructions for completing the Additional District Forms
The buttons below each link to an additional form that must be completed to be able to submit the student application.

Asterisk (*) denotes a required form

* Required Form: [2020-21 Deny Photo Posting Or Meal Finger Scan]   This form has not been completed
* Required Form: [2020-21 Housing Form]   This form has not been completed
* Required Form: [2020-21 Other Enrollment Questions]   This form has not been completed
* Required Form: [2020-21 Health Information]   This form has not been completed
* Required Form: [2020-21 ES Chromebook Agreement]   This form has not been completed

Complete Step 7

Once all forms have been completed you can click complete step 7.

Once you have completed all steps you can submit the application. If there is something that you haven't completed it will tell you what is not completed.

[Submit Application to the District]
* All steps must be Completed before an Application can be Submitted *