Student Emergency & Information Form

Step 1: If you have a Parent Portal account, login. The new campus parent portal is going to look different. Click on the 3 dashes to expand for the menu. Choose More, then click on Student Emergency Form:

Infinite Carry a		
Message Center	More	
Announcements (2 new) Inbox	Address Information	>
District Announcement NEW 07/08/2019	Course Registration	>
CB Parents: To view prior was report cards, PEN & Special Services Pr	Demographics	>
Message Center t cards will not t	Family Information	>
Today	Health	>
Weekly Overview Assignments	Important Dates	>
Grades Grade Back Undeten	Lockers	>
Attendance	Meal Benefits	>
Schedule Responsive Schedule	Transportation	>
Academic Plan	Campus Backpack	>
Reports Discussions	Student Emergency Form	>
More		

Step 2: Choose Click here to update an Existing CB Student Emergency Form.



Step 3: Choo	ose "Cli	ck Here to Up	late an Existir	ng CB Studen	t Emergency	y Form".		
Inline Registration								
Welcome to the Central E can only be completed by can be submitted. If chan	ucks Student parents and/o ges need to be	Emergency Information Form, or guardians where the child is a made after it is submitted, pl	You will be asked to confirm in the same primary address ease contact Central Registra	and/or update Demograph 5. Please press Existing Ci ation at CENTRAL_REGIS	iic Information, Emergenc B Student Registration to TRATION@CBSD.ORG.	y Contacts, Health Inforr continue. Please note, f	nation, and Media Rele hat only one Student E	ase Preferences. This for Emergency Information Fo
Click here to go to New S Student Name Nova Smith	Grade	Included in new App?	Reason if not included	d				
Registration Year 17-18	*							
Click here to update an Existin	g CB Student Em	ergency Form.						

Step 4: Select Your Language. Click Begin. In the next screen, Type in your first and last name as indicated.

Infinite Campus Online Registration Infinite Online Registration English | Español English | Español Welcome to OLR Please pick your preferred language. Begin Por favor, elija su idioma perferred. Infinite Online Registration English | Spanish Welcome Parent! Please type in your first and last name in the box below. By typing your name into the box above you attest that you are the person authenticated into this application or an authorized user of this account, and the data u are entering/verifying is accurate and true to the best of your knowledge. Submit

Step 5: Household Tab

The Student (s) Primary Household tab is the first section you will need to complete. Enter your Home Phone. Enter the phone number you prefer to be contacted at by the school (this can be a cell number). Click **NEXT** to verify Home Address and Mailing Address.

Infinite	Application Number 33071
* Indicates a required field	
Student(S) Primary Household	Jian
Completed	
▼ Home Phone	
Home Phone (267)999 -2323	
Next Click Next	
> Home Address	
> reparatorialing Address	



After you confirm/edit information, use the **NEXT** button until you only have the option for Previous or Save/Continue. DO NOT click Save/Continue if you have a NEXT button available.

Step 6: Parent/Guardian

The next section to complete is the **Parent/Guardian tab**. The first screen under the Parent/Guardian tab is **Demographics**; you will need to verify/enter the First Name, Last Name, and Gender of the parent completing the registration.

Click on **Next** to go to the second screen under this tab called **Contact Information**, which asks for phone numbers. An email address is also required at this screen. At this screen click **Save/Continue**.

Completed	
arent Name: Suz	y Smith
Demographics	
• Contact Informatio	חנ
Enter the contact in messages we will s	Tormation and how you'd prefer to receive the different types of and you. Contact Preferences Emergency High Attendance Behavior General Teacher Private (By Marking This Private You Opt
Cell Phone	(215)345 -1234 Out or the student Directory)
Work Phone	(215)538 -7654 x
Email	
OR	
Has no e-mail	
Other Phone	() - x
Secondary Email	
Description of Cor Emergency - Ma High Priority - Ma Attendarder - Ma Behavior - Marki General - Markin Teacher - Markin Private (By Marl	tact Preferences king this checkbox will use this method of contact for emergency messages arking this checkbox will use this method of contact for messages labeled as High Priority Notification. king this checkbox will use this method of contact for attendance messages, such as those sent by the Attendance Dialer Wizard. Ig this checkbox will use this method of contact for behavior messages, such as those sent by the Behavior Messenger Wizard. Ig this checkbox will use this method of contact for general school messages, such as those sent by the school or district. Ig this checkbox will use this method of contact for teacher-sent messages, including messages regarding failing grades and missing assignments. King This Private You Opt Out of the Student Directory) - Mark if number or email should be listed as private

Once you have completed the Parent/Guardian section, the tab will change to **GREEN** as seen below and you will then move on to **Emergency Contacts**.

Infinite Contract Campus Online Registration	Application Number 33071
* Indicates a required field	
Student(S) Primary Household Parent/Guardian Emergency Contacts (Not a Parent) Completed	Sibling(s) (Not a CB Student)

Step 7: Emergency Contacts

DO NOT enter parent/guardian information here. This section is for an individual you want called if you cannot be reached. In this section you will need the first name, last name, gender, at least one phone number and address of the emergency contact. It is required that you have at least **2** emergency contacts. Once you have completed the Emergency Contact section, the tab will change to **GREEN**.

licates a requ	ired field	10					
Student(S)	Primary Househ	old	Parent/Guardiar	▼Emerge	ncy Contacts (Not a Parent)	Gibling(s) (Not = 0B Student)	OCE Stur
Completed							
nergenco	Contacts (Not a Pa	rent)				
	, (
irst Name	Last Name	Gender	Completed	Record Type	Remove Existing Contact		
ponge	Bob	м	1	New		Edit	
age.	Bunny	м	1	New		Edit	
	tes that you must re	view the pers	on's information by	clicking on Edit in th	e vellow highlighted area. Once vo	u have verified or	
How -Indicat	rson's information,	please be sure	to click Save and	Continue.			
ellow -Indicat idated the per							
ellow -Indicat dated the per Indicates the	t person is complet	ed					

Step 8: Siblings (Not a CB Student)

This section is for individuals that live in your household that are not the parent/guardian and are not the student. This could be a younger child not of school-age. Click **Edit** to update sibling's information. This is NOT a mandatory screen, so you can click on **Save/Continue** and proceed to the Student tab.

finite Campus Onlin	e Registration				Œ	Application Num	ber 33071
Indicates a required	field						
🗸 Student(S) Prim	nary Household 🔶 🗸 I	Parent/Guardian	🗸 Emergency Contac	s (Not a Parent)	Sibling(s) (N	ot a CB Student)	CB Student
Completed							
Sibling(s) (No	ot a CB Student)_						
First Name	Last Name	Gender	Completed	Record Type			
	hat you must review the pers	on's information by clicki to click Save and Contin	ng on Edit in the yellow high ue.	lighted area. Once you	have verified or		
Yellow - Indicates the updated the person's	s information, please be sure son is completed						
Yellow - Indicates the updated the person's	s information, please be sure rson is completed						

Step 9: Student

The Student section is where the majority of information will be entered. Remember to click on **Next** whenever it is shown to continue through each area under the Student section. Be sure to carefully read and complete the **Health Services** information for your student. Several questions in this section are required for state and/or federal reporting.

Continue verifying information for any other students and until there are no more Yellow areas highlighted.

-	
> Demographics	
Race Ethnicity	
> Relationships - Parent/Guardians	
Relationships - Emergency Contacts	
> Relationships - Other Household	
> Release Agreements	
Health Services – Physician/Dentist Contact Information	
> Health Services - Medical Conditions (Completed Each Year)	
> Health Services - Medications (Completed Each Year)	
 Health Services - Medical Verification (Completed Each Year) 	
 No The school nurses have standing orders from the school district doctor to admparent consent. Please sign below if you consent to have your child medicates My child may receive acetaminophen according to standing orders ● Yes ○ No * If No has been selected for either, please provide additional information 	nu er acetaminophen (generic Tylenol), ibuprofen (generic Advil/Motrin), as deemed necessary by a nurse with in chool.
Parent/Guardian Signature	

Click Save/Continue.

The Student tab will be **GREEN** and you will see the screen below. You must click on **Submit** to have a completed registration.

Infinite				Number 33071
* Indicates a required field				
Student(S) Primary Household Completed	✓ Parent/Guardian	Emergency Contacts (Not a Par Emergency Contacts)	rent) V Sibling(s) (Not a CB Stude	ent) 🗸 CB Student
Once you have completed the accurate, please click the sub for staff verification and approv	registration process, and co mit button below. Once the a ral, you will not be able to mo Submit Back	nfirmed all information herein is pplication has been submitted dify this data.	B Arguineer Number 23	27
	Application Summary PDF	Compared to the completed for experience on the same of the s	Contraction Processing Contraction Processing Contractions Processing Procesing Processing Processing Processi	CT Tudent
Infinite			Application Number 33071	
Thank you for completing Online Repease click the link below.	gistration! For a PDF copy of th ication Summary PDF	e submitted data,		

If you have any questions about the information you verified or about changes that need to be made, please email <u>central registration@cbsd.org</u>.