



Application for Account

Parent/Guardian Information:

Please note, parent/guardian information **must** match the information on file in your student's school office in order for a portal account to be approved. Please update your household information in the school office accordingly.

First Name _____

Last Name _____

Street Address _____ Apt: _____

City _____ State _____ Zip _____

Home Telephone _____

Email Address _____

Requested Student Information

Last Name	First Name	Student ID	Student Grade

Please fill out this form and bring it to your student's school with your identification.

Office Use Only Do not write below this line.

Office Staff: Please verify that the information on this form matches the information in the Student Management system before approving the portal account

Date Application Received: _____

Type of ID Presented: _____

ID Number: _____