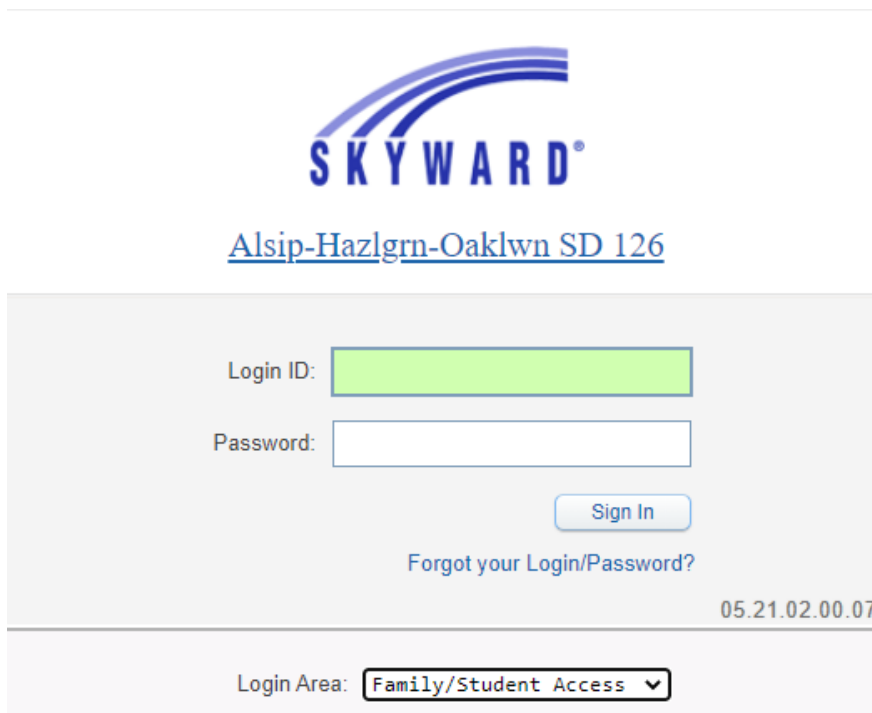


# Registrolínea para estudiantes que regresan

1. enInicie sesión en Family Access.



**SKYWARD®**

[Alsip-Hazlgrn-Oaklwn SD 126](#)

Login ID:

Password:

[Sign In](#)

[Forgot your Login/Password?](#)

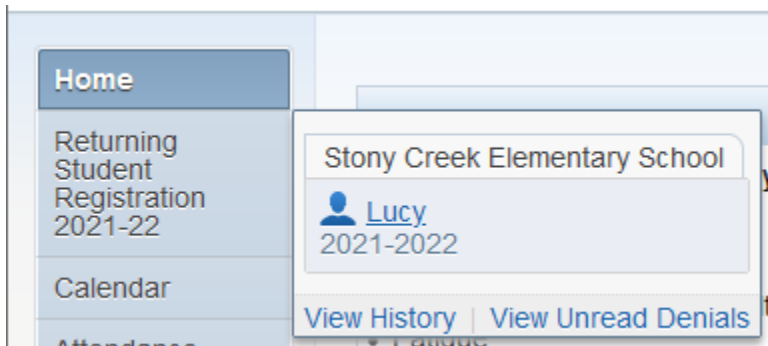
05.21.02.00.07

Login Area:

2. Haga clic en *Registro de estudiantes que regresan 2021-22*.



3. Haga clic en el nombre de su estudiante que está intentando registrar.  
**RECORDATORIO:** solo puede hacer un estudiante a la vez, y debe repetir estos pasos para cada estudiante.



4. Paso 1a - Información del estudiante. Verifique que la información sea correcta y realice los cambios necesarios. Haga clic en "Complete el paso 1a y vaya al paso 1b" cuando haya terminado.

Returning Student Registration 2021-22

Lucy (Stony Creek Elementary School 2021-2022)

**Step 1a. Verify Skylert Information: Student Information (Required)** Undo

**General Information**

First: Lucy Middle:

Last: Jones Suffix:

Gender: Female

Language: English Race:

Native Language: English

Do you have internet access?

Do you have a device to access eLearning material?

Military Connected

Method of Instruction:

Home Phone: (708) 123-3456 Ext:

Ext:

Ext:

Birth County:

Birth State: IL - ILLINOIS

Birth Country: United States

**1. Verify Skylert Information**

**a. Student Information**

b. Family Address

c. Family Information

d. Emergency Information

e. Emergency Contacts

f. Health Information

2. Verify Ethnicity/Race

3. Verify Communication Information

4. Student Health Information

5. Registration Documentation Forms

6. Free/Reduced Application

7. Fee Payment

8. Complete Returning Student Registration 2021-22

Previous Step Next Step

Close and Finish Later

**Complete Step 1a and move to Step 1b**

5. Paso 1b - Dirección de la familia. Verifique que la información sea correcta y realice los cambios necesarios. Haga clic en "Complete el paso 1b y vaya al paso 1c" cuando haya terminado.

**Step 1b. Verify Skylert Information: Family Address**  
(Required)

[Undo](#)

1. Verify Skylert Information
  - ✓ a. Student Information
  - b. Family Address**
  - c. Family Information
  - d. Emergency Information
  - e. Emergency Contacts
  - f. Health Information
2. Verify Ethnicity/Race
3. Verify Communication Information
4. Student Health Information
5. Registration Documentation Forms
6. Free/Reduced Application
7. Fee Payment
8. Complete Returning Student Registration 2021-22

**Address Preview Address**

Street Number:  Street Dir:  Street Name:

SUD:  #:  P.O. Box:

Address 2:

Zip Code:  Plus 4:  City/State:

**Mailing Address**

Street Number:  Street Dir:  Street Name:

SUD:  #:  P.O. Box:

Address 2:

Zip Code:  Plus 4:  City/State:

[Complete Step 1b and move to Step 1c](#)

6. Paso 1c: información familiar. Verifique que la información sea correcta y realice los cambios necesarios. Haga clic en "Complete el paso 1c y vaya al paso 1d" cuando haya terminado.

**Step 1c. Verify Skylert Information: Family Information**  
(Required)

[Undo](#)

1. Verify Skylert Information
  - ✓ a. Student Information
  - ✓ b. Family Address
  - c. Family Information**
  - d. Emergency Information
  - e. Emergency Contacts
  - f. Health Information
2. Verify Ethnicity/Race
3. Verify Communication Information
4. Student Health Information
5. Registration Documentation Forms
6. Free/Reduced Application

**Family Options**

Student's Home Language:   Receive a Paper Copy of Report Card

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Guardian <sup>1</sup>  
Number:  Primary Phone:  Ext:

Name: Jenny Jones  
 Custodial  
Relationship:  Cell:  Ext:

Employer:  Work:  Ext:

Home Email:

[Complete Step 1c and move to Step 1d](#)

7. Paso 1d - Información de emergencia. Verifique que la información sea correcta y realice los cambios necesarios. Haga clic en "Completar el paso 1d y pasar al paso 1e" cuando haya terminado.

**Step 1d. Verify Skylert Information: Emergency Information (Required)** Undo

*Last Name, First*

Physician:

Dentist:

Hospital:

Insurance:

Policy:

**Complete Step 1d and move to Step 1e**

- 1. Verify Skylert Information
  - ✓ a. Student Information
  - ✓ b. Family Address
  - ✓ c. Family Information
  - d. Emergency Information**
  - e. Emergency Contacts
  - f. Health Information
- 2. Verify Ethnicity/Race
- 3. Verify Communication Information
- 4. Student Health Information

8. Paso 1e - Contactos de emergencia. Verifique que la información sea correcta y realice los cambios necesarios. Haga clic en "Completar el paso 1e y pasar al paso 1f" cuando haya terminado.

**Step 1e. Verify Skylert Information: Emergency Contacts (Required)** Undo

Add Emergency Contact

Contact Number:  Delete this Emergency Contact

First:  Primary Phone:  Ext:

Middle:    Ext:

Last:    Ext:

Relationship:

Comment:

**Complete Step 1e and move to Step 1f**

- 1. Verify Skylert Information
  - ✓ a. Student Information
  - ✓ b. Family Address
  - ✓ c. Family Information
  - ✓ d. Emergency Information
  - e. Emergency Contacts**
  - f. Health Information
- 2. Verify Ethnicity/Race
- 3. Verify Communication Information
- 4. Student Health Information
- 5. Registration Documentation Forms
- 6. Free/Reduced Application

9. Paso 1f - Información de salud. Verifique que la información sea correcta y realice los cambios necesarios. Haga clic en "Complete el paso 1f y vaya al paso 2" cuando haya terminado.

Step 1f. Verify Skylert Information: Health Information (Required) Undo

Health Problems:

Allergy Notes:

Medication Notes:

Hospital Notes:

Complete Step 1f and move to Step 2

1. Verify Skylert Information
  - ✓ a. Student Information
  - ✓ b. Family Address
  - ✓ c. Family Information
  - ✓ d. Emergency Information
  - ✓ e. Emergency Contacts
  - f. Health Information**
2. Verify Ethnicity/Race
3. Verify Communication Information
4. Student Health Information
5. Registration Documentation Forms
6. Free/Reduced Application
7. Fee Payment
8. Complete Returning Student Registration 2021-22

Previous Step Next Step

Close and Finish Later

10. Paso 2: verificar la etnia / raza. Lea la declaración del superintendente y haga clic en "Continuar".

**Step 2. Verify Ethnicity/Race (Required)**

Dear Parent or Guardian:

Every school district is required to report to the Department of Education each year student data by race and ethnicity categories that are set by the federal government. The Department of Education does not report individual student data to the federal government but does report the total number of students in various categories in each school. These reports help us keep track of changes in student enrollments and ensure that all students receive the education programs and services to which they are entitled.

The federal government recently changed the reporting categories for student data. As a result, you have the opportunity to update the student data for your child. With the new reporting categories, you may now identify your child by ethnic group (either Hispanic/Latino or not Hispanic/Latino) and by one or more racial groups (American Indian/Alaska Native, Asian, Black/African-American, Native Hawaiian/Other Pacific Islander, White). Starting with the 2009-2010 school year, all schools will report student data to the Department of Education using the new categories.

Please complete the online form by no later than the first day of school.

For more information about the student data reporting categories for ethnicity and race, please contact the district office.

Sincerely,  
Craig Gwaltney  
Superintendent

[Continue](#)

Verifique que la información sea correcta y realice los cambios necesarios.  
Haga clic en "Complete el paso 2 y vaya al paso 3" cuando haya terminado.

<p><b>Step 2. Verify Ethnicity/Race (Required)</b></p> <p>Please answer <b>BOTH</b> questions 1 and 2.</p> <p>1. Is <b>Lucy Jones</b> Hispanic or Latino? <input checked="" type="checkbox"/> No, My Child is not Hispanic or Latino <input type="checkbox"/> Yes, My Child is Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race</p> <p>2. What is <b>Lucy Jones's</b> race? (Please mark all that apply) <input type="checkbox"/> <b>American Indian or Alaska Native</b> - A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment <input type="checkbox"/> <b>Asian</b> - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, e.g., Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam <input type="checkbox"/> <b>Black or African American</b> - A person having origins in any of the black racial groups of Africa <input type="checkbox"/> <b>Native Hawaiian or Other Pacific Islander</b> - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands <input checked="" type="checkbox"/> <b>White</b> - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa</p> <p><a href="#">Complete Step 2 and move to Step 3</a></p>	<p>1. Verify Skylert Information ✓ Completed 05/07/2021 2:41pm</p> <p>✓ a. Student Information</p> <p>✓ b. Family Address</p> <p>✓ c. Family Information</p> <p>✓ d. Emergency Information</p> <p>✓ e. Emergency Contacts</p> <p>✓ f. Health Information</p> <p><b>2. Verify Ethnicity/Race</b></p> <p>3. Verify Communication Information</p> <p>4. Student Health Information</p> <p>5. Registration Documentation Forms</p> <p>6. Free/Reduced Application</p> <p>7. Fee Payment</p>
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11. Paso 3: verificar la información de comunicación. Verifique que la información sea correcta y realice los cambios necesarios. Haga clic en "Complete el paso 3 y vaya al paso 4" cuando haya terminado.

**Step 3. Verify Communication Information (Required)**

Skylert enables you to receive notifications concerning your child(ren). You have control over which notifications to receive and how you would like to receive them.

My Skyward Contact Info

Contact Info	School Hours Emergency	Attendance	General	Non- sch Hours Emerg
* Primary Phone: (708) [REDACTED]				
Family With [REDACTED]	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cell Phone: (708) [REDACTED]				
Family With [REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
[REDACTED] Phone: [REDACTED]				
Family With [REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home Email: [REDACTED]				
Family With [REDACTED]	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

*\*\*Secondary Guardians are not allowed to update the Primary Phone number\*\**

Additional Contact Info for Family With [REDACTED]


Phone Numbers	School Hours Emergency	Attendance	General	Non- school Hours Emergenc
Additional Phone 1: (708) [REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

[Complete Step 3 and move to Step 4](#)

12. Paso 5: Formularios de documentación de registro: lea cada formulario y marque la casilla junto al nombre del formulario. Haga clic en "*Complete el paso 5 y vaya al paso 6*" cuando haya terminado.

**Step 5. Registration Documentation Forms (Required)**

[Print](#) [View Full Screen](#)



**ALSIP, HAZELGREEN, OAK LAWN SCHOOL DISTRICT 126**

Please click the links below to read each policy/agreement in detail.

**Acceptable Use Policy**

I have read "Acceptable Use of Technology" and hereby request that my child be allowed access to technology and associated online resources.

**Student/Parent Handbook**

I have read the Student/Parent Handbook. I have read the handbook and understand all the rules and expectations of the school and understand the consequences of not following all of the rules and expectations of the school and understand the consequences of not following the requirements.

**Media/Information Release Form**

**ONLY** if you wish to deny your child's participation in district publications, please check the box. If you do not check the box below the District assumes parental permission has been given.

**Take Home Tech Device and Acceptable Use Agreement**

I /we read, understand, and agree to the terms and conditions of the Tech Device Loan and Acceptable Use Agreement.

**Take Home Tech Device Out of District**

[Complete Step 5 and move to Step 6](#)



13. Paso 6: Solicitud gratuita / reducida. Si desea solicitar exenciones de tarifas, haga clic en "*Solicitud gratuita / reducida*" y complete la solicitud. Si no desea presentar una solicitud, haga clic en la casilla junto a "*No califico para los beneficios o no deseo completar una solicitud.*" Haga clic en "*Complete el paso 6 y vaya al paso 7*" cuando haya terminado.

**Step 6. Free/Reduced Application (Required)**

Your children may qualify for free or reduced price meals if your household income falls within the limits on this chart.

**Federal Income Eligibility Guidelines (Effective July 1, 2020 - June 30, 2021)**  
 Reduced-Price Meals (185% Federal Poverty Guideline)

Household Size	Yearly	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	23,606	1,968	984	908	454
2	31,894	2,658	1,329	1,227	614
3	40,182	3,349	1,675	1,546	773
4	48,470	4,040	2,020	1,865	933
5	56,758	4,730	2,365	2,183	1,092
6	65,046	5,421	2,711	2,502	1,251
7	73,334	6,112	3,056	2,821	1,411
8	81,622	6,802	3,401	3,140	1,570
Each Additional Person:	8,288	691	346	319	160

Choose one of the following options:

Free/Reduced Application

--OR--

do not qualify for benefits or do not wish to complete an application

Complete Step 6 and move to Step 7

14. Paso 7 - Pago de tarifas. Haga clic en Pago de tarifas para ingresar a nuestra tienda en línea RevTrak. Encontrará todas las tarifas requeridas, así como las tarifas opcionales para su hijo. Pague todas las tarifas requeridas. Haga clic en "Complete el paso 7 y vaya al paso 8" cuando haya terminado.

\*\* Haga clic en la X en la esquina superior derecha para cerrar la tienda en línea RevTrak una vez que se hayan pagado las tarifas para regresar al proceso de registro. \*\*

**Step 7. Fee Payment (Required)**  
Click on the X in the upper right corner to close RevTrak once fees have been paid to be returned to the registration process.  
We recommend if you have a student in grades 3-6, you purchase the Optional Chromebook Insurance found under Optional Fees.

[Fee Payment](#)

[Complete Step 7 and move to Step 8](#)

15. Paso 8 - Complete el registro de estudiantes que regresan. Una vez que haya completado TODOS los pasos, haga clic en "Enviar registro de estudiante que regresa 2021-2022."

**Step 8. Complete Returning Student Registration 2021-22 (Required)**  
By completing Returning Student Registration 2021-22, you are confirming that the Steps below have been finished.  
Are you sure you want to complete Returning Student Registration 2021-22 for [REDACTED]?

**Review Returning Student Registration 2021-22 Steps**

Step 1) <b>Verify Skylert Information</b>	Completed 05/10/2021 1:53pm
<i>No Requested Changes exist for Step 1.</i>	
Step 2) <b>Verify Ethnicity/Race</b>	Completed 05/10/2021 1:53pm
<i>No Requested Changes exist for Step 2.</i>	
Step 3) <b>Verify Communication Information</b>	Completed 05/10/2021 1:53pm
Step 4) <b>Student Health Information</b>	Completed 05/10/2021 1:53pm
Step 5) <b>Registration Documentation Forms</b>	Completed 05/10/2021 1:53pm
Step 6) <b>Free/Reduced Application</b>	Completed 05/10/2021 1:53pm
Step 7) <b>Fee Payment</b>	Completed 05/10/2021 1:53pm

Guardian Name: [REDACTED] Guardian Address: [REDACTED]

[Submit Returning Student Registration 2021-22](#)

