430 W. Washington Avenue Elmira, NY 14901 Phone: (607) 735-3000 www.elmiracityschools.com **REGISTRATION FORM F007**

PARENT INSTRUCTIONS: Complete this form for all students in your household. PLEASE PRINT CLEARLY.

A. PARENT PORTAL INFORMATION

The Elmira City School District's Parent Portal is a free service offered to all parents/legal guardians of students currently enrolled in grades K through 12. The intention of this access is to enhance communication and dialog between school and home.

- Access to the Parent Portal is a privilege. In submitting this request I understand that the District will provide me with a login
 password that will allow me to access information about my child's school performance, including classes, teacher names,
 attendance, grades, and discipline. I understand that this information will be accessible using the Schooltool Parent Portal, which
 is maintained by the District.
- I understand that the Schooltool Parent Portal may record and retain information about when and how I use the Schooltool Parent Portal, and that this information is the property of the District and subject to review by the District.
- I accept responsibility for all actions that are performed by anyone gaining access to the Schooltool Parent Portal using the login password assigned to me.
- I understand that the District makes no guarantee that the functions or the services provided via the Schooltool Parent Portal will be error-free or without defect. The District retains the discretion to suspend access to the Schooltool Parent Portal when there is reasonable suspicion to believe that the account has been compromised.
- I certify that I am a parent or legal guardian of the students I have listed below.

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B. PARENT CONTACT INFORMATION							
Name				Home Phone			
Address				- I	ı		
	HOUSE #	STREET		UNIT#	CITY	STATE	ZIP
Email Address							
	This amail	addrass is required	to obtain an account ar	nd serves as vour prin	nary omail ad	Idraes with the District	
C. STUDENT INF			to obtain an account ar	id serves as your prin	nary eman ad	idless with the District.	
I hereby give the Elmira City School District permission to place information regarding the following student(s) in the Parent Portal program							
for me to access. NOTE: You only need to submit one application to view all children registered in your care.							
		STUDENT I	NAME			GRADE	
1.							
2.							
3.							
4.							
5.							
6.							
If additional lines are needed, please attach a separate page							
D. PARENT/GUARDIAN SIGNATURE By signing below, I indicate that I have read the Schooltool Parent Portal user guidelines above for parents/legal guardians and agree to							
abide by and support these rules. I understand that if I violate any of the above terms, that I may lose my privilege to use the Parent Portal.							
Parent or Guardian Signature					Date:		
You will be notified at the email address above when the account is created. It may take up to two weeks for the account to be created.							
decourt to be disactured.							