Instructions on completing the Existing Online Registration Application

1. Click More



2. Click Online Registration

E Infinite Campus		
Message Center	More	
Today		
Calendar	Address Information	>
Assignments	Assessments	>
Grades	Demographics	>
Grade Book Updates	Family Information	>
Attendance	Health	>
Academic Plan		
Fees	Important Dates	
More	Learning Tools	>
	Lockers	>
	Transportation	>
	GTID	>
	Online Registration	>

3. Click Start.

Message Center	✓ More Online Application		
Today	NAME	STATUS	ACTION
Calendar	22.02 Evicting Student Registration	NOT STARTED	Start
Assignments		NOTOTAKTED	Start
Grades			
Grade Book Updates			
Attendance			
Academic Plan			
Fees			
More			

4. Click Begin Registration

Message Center	Conline Application Existing	Student Regi	stration		
Today					
Calendar	I his editor is to update data for studer If you only want to register new studer	its that are curre its for the select	ntly enrolled in the District. You may a year at this year, please use the link be	dd new students that are registering for elow to go to the New Student Registration	the select year later in the process. on form.
Assignments	STUDENT'S LEGAL NAME	GRADE	INCLUDED IN NEW APP?	REASON IF NOT INCLUDED	ONLINE REGISTRATION SUBMITTED?
Grades		12	yes	Included	no
Grade Book Updates					
Attendance	Begin Registration				
Academic Plan					
Nore					
Wore					

5. Click your preferred language.



Por favor, elija su idioma perferred.

Application Number

6. Type your first and last name in the box then click Submit.



7. Read the instructions then click begin.



English | Español



Welcome to the Paulding County School District's Online Application. Before you click begin, please gather the following:

- · Household information -- address and phone number
- · Parent(s) information -- work and cell phone numbers, email address
- Student information -- demographic and health/medication information
- Forms to upload -- student's birth certificate, social security card(if providing), GA Form 3231 immunization, GA Form 3300 EEDN, student's withd enrolling parent's picture ID, and 2 proofs of residency
- Emergency Contacts phone numbers

Note: Required fields are marked with a red asterisk, and the District will receive the data exactly as it is entered. Please be careful of spelling, capital be entered as MM/DD/YYYY and phone numbers as xxx-xxx.



Application Number

Application Number

8. Review the information listed then click the next button. When there is not a next button, click save to go to the next tab.

Infinite Contraction	Application Number
* Indicates a required field	
Thousehold OParent/Guardian OStudent Completed	
▼ Primary Phone	
Primary Phone	
Next >	
Residential Address	
Address	
Save	

(

9. Click Edit for each parent listed. Review the information listed and make any changes to contact information for each parent. If a new parent needs to be added, click the Add New Parent/Guardian button. Once you have verified the contact information for each parent, click the Save/Continue button.

Infinite Campus Onlin	ne Registration				Application
*Indicates a required	l field				
✓ Household	▼Parent/Guardian	Student	Completed		
_Parent/Guar	dian				
In this section, ple completing the qu	ease add each parent/g estions.	guardian, one at a	time, by clicking the	e "Add New Parent/Guar	dian" button and
First Name	Last Name	Gender	Completed	Record Type	
		м		Existing	Edit
		F		Existing	Edit
Yellow - Indicates t	that person is missing requi	ired information. Sele	ct the highlighted row to	continue.	
 Indicates that 	person is completed.				
Add New Parent/G	Suardian				
Back Save/	/Continue				

10. Click the Edit button to verify information for each student listed. You will review the parent/student handbook and other important information as well. Click next after each section. Once there is not a next button, click save.

Campus o	nline Registratio	on				Applica
ndicates a requ	ired field					
/ Household	✓ Parent/G	Buardian	Student Comp	leted		
Student						
First Name	Last Name	Gender	School	Completed	Record Type	
First Name	Last Name	Gender M	School	Completed	Record Type Existing	Edit
First Name	Last Name	Gender	School	Completed	Record Type Existing	Edit
First Name Description of Ar Yellow - Indicat	Last Name	Gender M	School	Completed	Record Type Existing	Edit
First Name Description of Av Yellow - Indicate Indicates t	Last Name	Gender M	School	Completed	Record Type Existing	Edit

11. You will need to enter the contact order for each parent listed in the order you want them contacted.

Legal Name	Relationship*	Guardian	Mailing	Portal	Messenger	Contact Order
	Father 🗸	1	×	<i>~</i>	12 I	2 🗸
	Mother 🗸	1	s.	1	v	1 🗸
essenger - Marking this checkoo essenger - Marking this ch ontact Order - Adding a co	eckbox will flag this person to ntact order on contacts will p	receive messages from the rompt district staff to contac	District's messer	nger system. n the order that	t you specify.	
essenger - Marking this checkoo essenger - Marking this ch ontact Order - Adding a co Marking this checkbox will in a relationship will be ender	eckbox will flag this person to a po eckbox will flag this person to ntact order on contacts will pr ndicate that this person does it if one exists	receive messages from the rompt district staff to contac not share a relationship to th	District's messer t these persons i e student. By ch	nger system. n the order that necking this che	t you specify. ckbox you are indicating	that this person no lo
lessenger - Marking this checkou lessenger - Marking this ch ontact Order - Adding a co Marking this checkbox will in he relationship will be ended	oc will hay this person for a pr eckbox will flag this person to ntact order on contacts will pr ndicate that this person does n if one exists.	receive messages from the roompt district staff to contac not share a relationship to th	District's messer t these persons i e student. By ch	nger system. n the order that necking this che	t you specify. ckbox you are indicating	that this person no lo

12. Click the button if no medical or mental health conditions need to be listed for your student. If a condition needs to be listed, please click the add button.

▼ Health Services - Medical or Mental Health Conditions
Please indicate below if student has any medical / mental health conditions, medical nutritional needs, and/or any life-threatening food or insect allergies. If more than two conditions exist, please discuss with Central Registration at time of appointment.
If student has a medical nutrition need that is a disability or an anaphylactic food allergy, a Special Needs Form must be completed. This form is located on the Paulding County School District's website under Nutrition Services .
EP-10 count condition must be a count of the no medical or mental health conditions box must be checked. No medical or mental health conditions
Previous Next

13. Click the button if no medications need to be listed for your student. If you need to list medications, please click the add button.

•	Health Services - Medications
<	No medications
	Previous Next

14. You must click on each link to review the information with your student. You must click the check box next to each "Yes, I have" statement. Please review each document carefully. Please read the statements listed then type your student's and your legal name. Click Save.

Parent & Student Information Guide and Acknowledgement Forms

Middle and High School Parent & Student Information Guide

Middle and High School Parent & Student Information Guide*

🗌 * Yes, I have accessed, read, and understand the Parent and Student Information Guide in its entirety. I am verifying that I have reviewed with my student the Paulding County School District Student & Parent Handbook online for the current school year. I have reviewed the information contained therein with my child concerning:

- The Family Educational Rights and Privacy Act (FERPA)
 Protection of Pupil Rights Amendment of 1978 (PPRA)
 The "Right to Know" Professional Qualifications Notification
 Paulding County School District Policies: JCDB (Student Dress Code), JD (Student Discipline), JD-R (3) Student Code of Conduct Middle & High School, JB (Student Attendance), and IFBGA (Internet Acceptable Use).

Athletic Code of Conduct

Athletic Code of Conduct Acknowledgement Form*

* Yes. I have reviewed the Athletic Code of Conduct and understand the consequences set forth in the code of conduct.

Technology Acceptable Use

Technology Acceptable Use and Internet Safety Agreement- User Access*

* Yes, I have reviewed the Technology Acceptable Use and Internet Safety Agreement and understand the consequences set forth in the Technology Agreement.

Parent & Student Acknowledgement

Parent & Student Acknowledgement Form*

* Yes, I have reviewed the Parent & Student Acknowledgement Form and understand the consequences set forth in the Parent & Student Acknowledgement Form.

- I understand that I must notify the school within 10 days of enrollment or the first 10 days of the academic school year if my child will go home in a different manner other than normal during an emergency
- Parents, legal guardians, or eligible students may make a written request to the Principal of the school where a student is enrolled, within the first 10 days of the academic school year, to request Parents, legal guardians, or eligible students may make a written request to the Principal of the school websites, etc
 Parents, legal guardians, or eligible students may make a written request to the Principal of the school where a student is enrolled to have their number removed from receiving informational notifications. The number identified in that request will still receive emergency notifications. Parents may opt-out of receiving notifications (emergency and informational) at any time.

I confirm and agree that the below typed names shall be considered an original signature for all purposes and shall have the same force and effect as an original signature.

I understand that by typing the student's name, I am acknowledging that the student has also reviewed, read, and understands the Parent and Student Information Guide in its entirety. I understand that by typing the parent's name, I am acknowledging that the parent has reviewed, read, and understands the Parent and Student Information Guide in its entirety.

Student Signature:

*

Parent Signature:

Previous

15. Click Submit.



Application Number