



Family Access Overview

This is an online source for parents and guardians to obtain information regarding their students. In addition to viewing student calendars, gradebook, attendance, and schedule Family Access now offers the convenience for parents and guardians to update student information online.

New Family Access Home Page

Left hand side tabs:

- Parent Wizard – display current student
- Calendar
- Gradebook
- Attendance
- Student Info
- Schedule
- Test Scores
- Fee Management
- Academic History
- Health Info
- Login History

Right:
Review Calendar

Click on any student in your family.

To access Parent Wizard:

- Click on the drop down box under Family Access and choose a student.
- Select 2014-2015 Parent Wizard

**Verify Student Information:
Step 1:**

a). Student Information

Update Options:

- Phone number
- Home Email
- Publication Info.

Option: Check box "I have completed this step" when complete.

b). Family Address

Option of address change:

Please provide proof of residency to school for all address changes. Address changes will not be approved without proof of residency.

c). Family Information

Update Options:

- Update phone number
- Update email

d). Emergency Information

Update Options:

- Critical Alert Information
- Physician
- Dentist
- Hospital
- Insurance
- Policy

- Home
- 2014-15 Parent Wizard**
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2014-15 Parent Wizard

MARY (Wicklows Elementary 2014-2015)

Step 1e. 14-15 Verify Student Information: Emergency Contacts I have completed this step

When changing home address, proof of residence must be submitted to the front office of your child's school.

Contact Number: Primary Phone: (407) 555-5555 Ext:

First: Work - (407) 321-8555 Ext:

Middle:

Last: Cell - (555) 555-5555 Ext:

Comment:

Contact Number: Primary Phone: (407) 444-4444 Ext:

First: Ext:

Middle:

Last: Ext:

Comment:

Contact Number: Primary Phone: (321) 222-6666 Ext:

First: Ext:

Middle:

Last: Ext:

Comment:

- 1. 14-15 Verify Student Information Completed 07/28/14 11:25 AM
- a. Student Information
- b. Family Address
- c. Family Information
- d. Emergency Information
- e. Emergency Contacts**
- f. Health Information
- 2. 14-15 Health Services Emergency Card
- 3. 14-15 Release Form (Field Trip)
- 4. Security Card
- 5. Student Code of Conduct
- 6. Health Insurance for Students
- 7. Food Services
- 8. Extended Day
- 9. Families in Transition
- 10. Volunteer Programs Information
- 11. Complete 2014-15 Parent Wizard

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 Close and Finish Later

e). Emergency Contacts

Update Options:

- Add/Delete emergency contacts

Note: You may add up to 3 contacts.

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2014-15 Parent Wizard

MARY (Wicklows Elementary 2014-2015)

Step 1f. 14-15 Verify Student Information: Health Information I have completed this step

When changing home address, proof of residence must be submitted to the front office of your child's school.

Health Problems:

Allergy Notes:

Medication Notes:

Vision Notes:

Hearing Notes:

Other Concerns:

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- 2. 14-15 Health Services Emergency Card
- 3. 14-15 Release Form (Field Trip)
- 4. Security Card
- 5. Student Code of Conduct
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f). Health Information

Update Options:

- Health Problems
- Allergy Notes
- Medication Notes
- Vision Notes
- Hearing Notes
- Other concerns

Note: Health Information requires approval by the school. This is to ensure schools are aware of health concerns.

2. 14-15 Emergency Card

- Click on form

Note: Approval for your student to participate in the School Health Services Program. This program may include health appraisals and/or screenings in vision, hearing, growth and development, nutrition, dental health, scoliosis and communicable diseases as required by law.

- Complete the form

- Select agree/disagree

Electronic signature and date required

Family Access DAWN JORGE My Account Email History Exit

SKYWARD MARY JORGE

2014-15 Parent Wizard

Home

2014-15 Parent Wizard

Calendar

Gradebook

Attendance

Student Info

Schedule

Test Scores

Fee Management

MARY (Wicklow Elementary 2014-2015)

Step 3. 14-15 Release Form (Field Trip) I have completed this step

This Release form must be read and signed by parent(s) or guardian(s) of every student for any off-campus field trip or activity.

14-15 Release Form (Field Trip)

- 14-15 Verify Student Information
 - Completed 07/29/14 11:25 AM
 - a. Student Information
 - b. Family Address
 - c. Family Information
 - d. Emergency Information
 - e. Emergency Contacts
 - f. Health Information
- 14-15 Health Services Emergency Card
- 14-15 Release Form (Field Trip)

Elementary Release Form

Name: JORGE, MARY Gender: Male Grade/Grad Yr: 03/2023 Other ID: 6920941002

School Name: Wicklow Elementary Student D.O.B: 01/01/2005

Student's Name: MARY JORGE Grade: 03

Student's Address:
2510 RIDGEWOOD AV
SANFORD FL 32773

Parent/Guardian: DAWN JORGE
Home (407) 555-5555 Work (407) 321-8555 Mobile

Emergency Contact Name: DAWN JORGE
Home (407) 555-5555 Work (407) 321-8555 Mobile

Student's Physician:
Physician Address:
Physician Phone Number:

Medical Insurance: Policy #:
Medical Insurance Address:
Allergies:
Additional Medical Information:

This form must be read and signed by parent(s) or guardian(s) of every student for any off-campus field trip or activity. This form will be retained for the current school year. Please notify the school of any change in this information.

Individual consent forms will be sent home for each field trip.

I/We acknowledge that the School Board of Seminole County, Florida, is not liable for medical expenses, hospital expenses, or other such charges incurred for such services as may be rendered for or on behalf of my/our child as a result of injury or sickness. I/We understand that if my/our child is injured or becomes sick, the School Board of Seminole County, Florida, will not be liable unless the injury or illness is the result of negligent conduct on the part of an employee of the School Board of Seminole County, Florida.

Signature: I agree Date: 04/09/2014

3. Release Form:

Note: This form must be read and signed by parent(s) or guardian(s) of every student for any off-campus field trip or activity. This form will be retained for the current school year.

- Click on form

Electronic signature required.

Family Access DAWN JORGE My Account Email History Log Out

SKYWARD MARY JORGE

Home

2014-15 Parent Wizard

MARY (Wicklow Elementary 2014-2015)

Step 4. Security Card I have completed this step

This Security Card must be read and signed by parent(s) or guardian(s) of every student.

Security Card

1. 14-15 Verify Student Information
Completed 07/23/14 11:25 AM

a. Student Information

b. Family Address

c. Family Information

d. Emergency Information

e. Emergency Contacts

f. Health Information

2. 14-15 Health Services Emergency Card

3. 14-15 Release Form (Field Trip)

4. Security Card
Completed 07/23/14 11:47 AM

Seminole County Public Schools
Security Card
2014 to 2015

NOTE: YOUR CHILD WILL NOT BE RELEASED TO ANY ADULT (i.e., Parents, Friends, Neighbors, Relatives, Co-Workers, Etc.) OTHER THAN THOSE LISTED BELOW. PICTURE ID REQUIRED.

Please insert a four letter number "Security Code" by which we can identify you over the telephone when you call or when your child is being released during the school day. Choose your own personalized sequence: (Example: A2C6, CATS, 1234)

NOTE: If a change is required for this "Security Code", you MUST notify your child's school.

Student Name: MARY JORGE Gender: Male D.O.B: 01/01/2005

Address: RIDGEWOOD AV Primary Phone: (407) 555-5555

Grade: 03 Teacher:

Guardian 1: DAWN JORGE

Phone 1: (407) 555-5555 Phone 2: (407) 321-8555 Phone 3: (555) 555-5555

Guardian 2:

Phone 1: (407) 555-5555 Phone 2: Phone 3:

Custody Concerns:

- Yes
- No

If a parent is to be denied access to their child, a copy of the most recent Legal Court Order MUST be provided to the school office. We appreciate your assistance in this manner.

Emergency Contact: DAWN JORGE Emergency Contact Phone: (407) 555-5555

My Child: MARY JORGE is a:

Please Select One

- Bus Rider
- Car Rider
- Walker
- Bike Rider
- Day Care

She/He is allowed to leave school and/or be picked up after school by ANY ONE of the adults listed on this card.

Name	Relationship	Home Phone	Work Phone	Cell Phone
George Jorge	Father	555-5555		
Sue Smith	Neighbor	888-8888		
Josie Jones	Aunt	999-9999		

Signature: I agree Date: 07/22/2014

4. Security Card

- Click on form

Provides the names and phone numbers of individuals whom you authorized to pick up your student(s).

Note: Security Codes can only be entered once. If you need to make a change, please contact your school.

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MARY (Wicklow Elementary 2014-2015)

Step 4. Security Card

This Security Card must be read and signed by parent(s) or guardian(s) of every student.

Security Card

I have completed this step

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Emergency Card

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Completed 07/29/14 11:47 AM

5. Student Code of Conduct

6. Health Insurance for Students

7. Food Services

8. Extended Day

9. Families in Transition

10. Volunteer Programs Information

11. Complete 2014-15 Parent Wizard

Previous Step

Next Step

Close and Finish Later

Other Areas:

- 5. Student Code of Conduct**
- 6. Health Insurance for Students**
- 7. Food Services**
- 8. Extended Day (Elementary Only)**
- 9. Families in Transition**
- 10. Volunteer Information Program**
- 11. Complete Parent Wizard (check box at top of each page).**