

# SIS: 家长线上注册步骤说明

## 目录

开始注册前: OLR (线上注册) 是否适合您?	1
访问说明	3
创建新的线上注册报名	4
添加常住家庭信息	6
添加家长和监护人	7
添加紧急联系人	10
添加学生信息	12
返回已有申请	26

## 开始注册前: OLR (线上注册) 是否适合您?

家长或法定监护人可以通过使用线上注册工具提交申请和文件, 为 K-12 年级学生注册入学当前学年及下一学年。

无论您是否是新入学费城学区 (SDP), 第一次为您的孩子注册, 或为您的孩子注册入学幼儿园 (kindergarten), 您都需要从这里开始办理。

让我们一起来看一些阐明性问题, 了解线上注册是否是适合您为孩子注册的途径。

您的孩子是否...

...从学前班 (pre-kindergarten) 升入幼儿园 (kindergarten) ?	... 正在申请邻近学校以外的学校? <sup>1</sup>
... 是当前没有在费城学区学校就读的新入学或重返学区的 K-12 年级学生?	... 正在申请一所特许学校? <sup>2</sup>
	... 当前在一所 SDP 学校就读? <sup>3</sup>
<b>是! 继续进行线上注册。</b>	<b>否。请查看以下说明, 了解详细信息。</b>

如果线上注册不适合您:

<sup>1</sup> 请访问 [学生注册与安置](#) 网站, 了解更多信息或了解有关申请邻近学校以外学校的信息。

<sup>2</sup> 请访问[特许学校办公室](#) 主页了解更多有关特许学校申请的信息。

<sup>3</sup> 联系您的邻近学校, 更新您的人口和家庭信息。

在线上为您的孩子注册包括四个特殊部分，需要大约 45 分钟完成。这个过程中需要上传文件。

## 访问说明

1. 家长和监护人可以通过访问学生注册与安置办公室网站 ([philasd.org/studentplacement](http://philasd.org/studentplacement)) 使用线上注册工具。点击标有“*New Student Registration* (新生注册)”的蓝色按钮。

OFFICE OF  
**Student Enrollment & Placement**  
440 N. Broad Street  
215-400-4290 Suite: 111, 1st Floor

Home Enroll & Register School Selection Process Renaissance Charter Contact

**Student Enrollment & Placement**

The Office of Student Enrollment and Placement supports K-12 children and families in accessing the District's educational programs and services.

YOU ARE HERE > Student Enrollment & Placement > Student Enrollment & Placement

About →  
**New Student Registration →**  
Kindergarten Registration →  
School Selection →  
Renaissance Charter Schools →

**About Student Enrollment and Placement**

The School District of Philadelphia has a clear vision; for all children to have access to a great school close to where they live. The mission of the Office of Student Enrollment and Placement is to support K-12 children and families in enrollment, registration, and school placement. Our goal is to ensure equitable access for all students across our K-12 schools.

2. 新生注册 (*New Student Registration*) 页面包括多种资源, 供准备为其学生注册下一学年的家长和监护人使用, 其中包括所需文件的说明以及如何在线上为您的孩子注册的说明指南。请浏览这些材料。开始为您的孩子进行线上注册, 请点绿色的线上注册 *Online Registration (OLR)* 链接:

About →  
**New Student Registration →**  
Kindergarten Registration →  
School Selection →  
Renaissance Charter Schools →  
Resources & FAQs →  
Contact Us →

**New Student Registration**

Registration is for students of all grades (K-12) entering the District for the first time and/or are coming to the District from a different school district.

**The School District of Philadelphia offers two ways to register their children in school:**

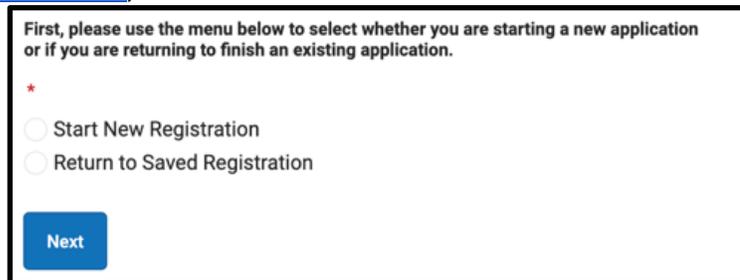
- **Option 1:**  
Register using the **Online Registration (OLR)**. The OLR allows families to complete the enrollment process online, from wherever they have access to the internet. Before starting this process, we encourage families to follow all instructions (see below!) carefully and have all of the proper documents in electronic format.
- **Option 2:**  
Register using the **paper application at the school** connecting to the home address (their "catchment" school). Families are encouraged to first, contact their catchment school to see if an appointment is necessary. You must bring the required enrollment documents when registering your child in-person (see Step 2 below: proof of child's age, immunization record, and two proofs of address).

## 创建新的线上注册报名

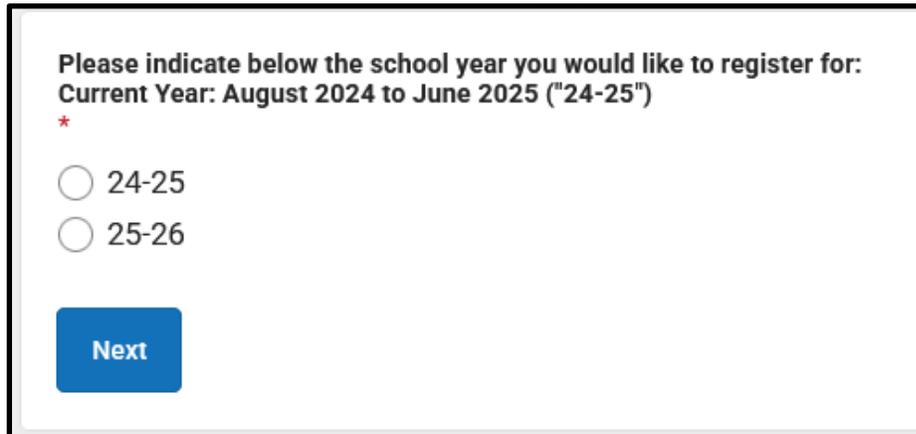
1. 将加载 [线上注册欢迎页面](#)。在页面顶部，点击您首选的语言，以获取翻译版本的申请。默认语言为英语。



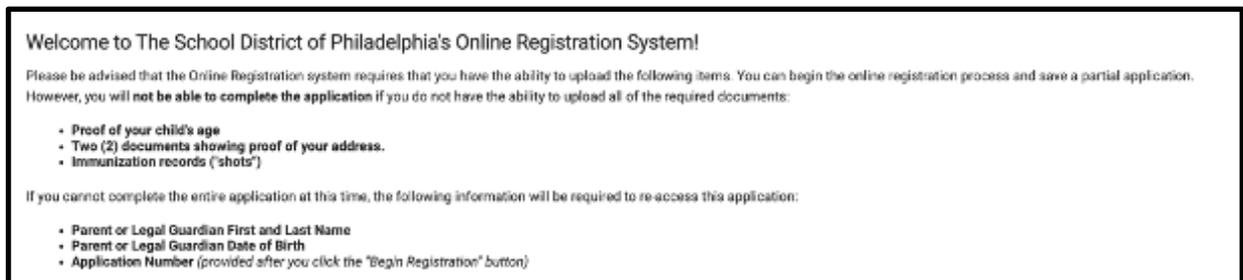
2. 开始一份新的申请，请点击显示 *Start New Registration*（开始一个新申请）选项左侧的按钮，以选择该选项。接着，点击 **Next**（下一步）。(有关编辑已有申请的说明，请见[返回已有申请](#))。

A screenshot of a registration selection screen. The text reads: "First, please use the menu below to select whether you are starting a new application or if you are returning to finish an existing application." Below this is a red asterisk, followed by two radio button options: "Start New Registration" and "Return to Saved Registration". At the bottom is a blue button labeled "Next".

3. 选择您希望注册的学年。然后，点击 **Next**（下一步）。

A screenshot of a school year selection screen. The text reads: "Please indicate below the school year you would like to register for: Current Year: August 2024 to June 2025 ('24-25)". Below this is a red asterisk, followed by two radio button options: "24-25" and "25-26". At the bottom is a blue button labeled "Next".

4. 浏览此页面包含的有关所需文件以及保存凭证以便稍后访问申请的说明。确保您能够将所需文件附加到线上注册申请中。然后，向下滑动开始输入父母或法定监护人信息以开始您的申请。

A screenshot of a welcome page for the Philadelphia School District's Online Registration System. The text reads: "Welcome to The School District of Philadelphia's Online Registration System! Please be advised that the Online Registration system requires that you have the ability to upload the following items. You can begin the online registration process and save a partial application. However, you will not be able to complete the application if you do not have the ability to upload all of the required documents:" followed by a bulleted list: "• Proof of your child's age", "• Two (2) documents showing proof of your address.", "• Immunization records ('shots')". Below this is another line of text: "If you cannot complete the entire application at this time, the following information will be required to re-access this application:" followed by another bulleted list: "• Parent or Legal Guardian First and Last Name", "• Parent or Legal Guardian Date of Birth", "• Application Number (provided after you click the 'Begin Registration' button)".

5. 输入您的名字和姓氏，您的出生日期和您的电子邮箱地址。输入您的电子邮箱地址以获取有关您申请状态的重要更新。使用下拉菜单，通过选择 **Yes**（是）或 **No**（否）来表明您家中是否有任何学生当前在学区学校就读。

**Note: The below information should be filled out by the parent/legal guardian.**

25-26

**Parent/Legal Guardian First Name \***

  
**Parent/Legal Guardian Last Name \***  
**Parent/Legal Guardian Date of Birth (MM/DD/YYYY) \***   
**Parent/Legal Guardian Email Address**  
**Does your child have siblings currently enrolled at SDP?**  
Please select **'Yes'** in the dropdown if there are any students in your household who are currently enrolled in a Philadelphia District school. They will need to be listed in the 'School-Age Sibling' section of the application.  
If there are no siblings, please select **'No'**.  
\*

▼

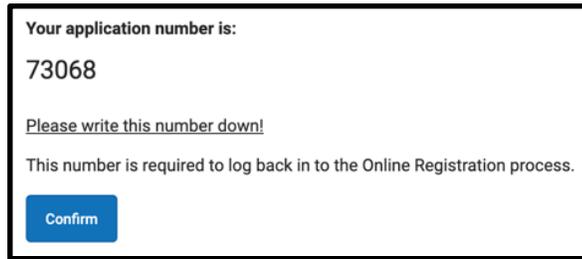
6. 找到页面底部的验证码，在图片下方的方框内输入字母和数字的组合顺序。点击 **Begin Registration**（开始注册）。

Please type the letters you see displayed in the image below.  
The entry is case sensitive.



If the text is difficult to read, press the blue button to generate a new code.

7. 将显示您的申请编号。请写下这个编号，因为如果您出于任何原因需要退出此程序，您需要这个编号以重新访问线上注册系统。点击 **Confirm** (确认)。



Your application number is:  
73068

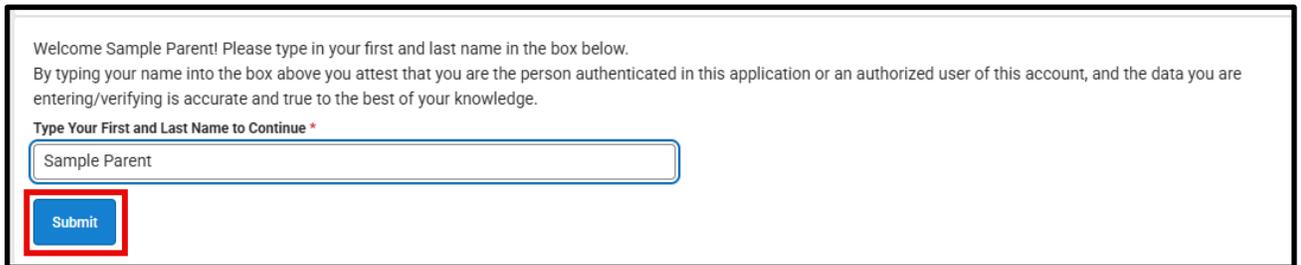
Please write this number down!

This number is required to log back in to the Online Registration process.

Confirm

**请注意:** 申请编号用于追踪整个学区的线上申请，并不反映某所学校的线上申请人数。您将需要这个编号，以便在之后返回您的申请。

8. 将出现一个新的窗口，请您确认您是在前一个页面中所输入的家长/监护人，或您是这个账号的授权用户，并确认您所提供的数据就您所知是准确且真实的。提供您的电子签名。在文本输入框输入您的姓名，并在下方的横线上使用鼠标创建电子签名。接着，点击 **Submit** (提交)。



Welcome Sample Parent! Please type in your first and last name in the box below.  
By typing your name into the box above you attest that you are the person authenticated in this application or an authorized user of this account, and the data you are entering/verifying is accurate and true to the best of your knowledge.

Type Your First and Last Name to Continue \*

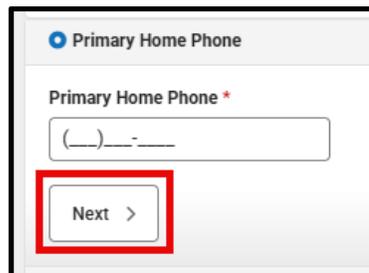
Sample Parent

Submit

## 添加常住家庭信息

申请将打开，从**学生常住家庭 Student(s) Primary Household** 这一项开始。“常住家庭 (Primary Household)”一词指的是您孩子大部分时间居住的地址。如果您的孩子有部分时间也住在另一个地址，您将有机会在此申请中的家长/监护人部分提供该信息。

1. 输入您希望指定的孩子常住家庭电话号码。学生只能有一个常住家庭，但可以有多一个非常住家庭。如需要，您可以在稍后输入非常住家庭的信息。在输入电话号码后，点击 **Next** (下一步)。



Primary Home Phone

Primary Home Phone \*

( ) - - -

Next >

2. 输入 **House Number** (门牌号) 来输入家庭住址。如适用，请从下拉菜单中选择 **Direction** 方位(北 North, 西北 Northwest, 南 South, 西南 Southwest 等)。输入 **Street**



**Parent/Legal Guardian Name: Sample Parent**

✔ Demographics

Enter the parent/legal guardian information below.

**First Name: \***

**Middle Name:**

**Last Name: \***

**Suffix:**

**Date of Birth:**

**Gender: \***

**Parent/Legal Guardian's Military Status (if any):**

**I am registering myself as an emancipated or unaccompanied minor. \***

**Does this person live at the address listed below? \***

440 N Broad St  
Philadelphia, PA 19130-4015

**请注意:** 如果输入的一名家长/监护人不住在所列出的地址, 此家长是否住在以下地址 ( *Does this person live at the address listed below* ) 这个问题请选择 No (否), 您之后将有机会为此家长/监护人添加住址, 该住址将被划定为非常住地址。

3. 输入家长/监护人的联系信息。勾选屏幕右侧的相应方框, 表明您的 *Contact Preferences* (联系方式偏好)。阅读每个偏好选项的说明。请勿勾选 *Private* (私

密) 复选框下的方框。请注意, 该页面需输入至少一个电话号码。如果您希望接收短信, 请勾选短信 Text(SMS) 复选框。输入家长/监护人的 Preferred Contact Language (首选联系语言)。点击 **Save/Continue** (保存)。

Parent/Legal Guardian Contact Information

Note: At least one phone number is required.

Enter the parent/legal guardian's contact information and check the boxes for your preferred type(s) of communication from the District.

Primary Phone: \*

Work Phone:

Other Phone:

Email:

Contact Preferences						
EMERGENCY	HIGH PRIORITY	ATTENDANCE	BEHAVIOR	GENERAL	TEACHER	PRIVATE
<input checked="" type="checkbox"/>	<input type="checkbox"/>					

Secondary Email:

Preferred Contact Language: \*

Description of Contact Preferences  
**Emergency** : Check this box to receive emergency notifications at this contact.  
**High Priority** : Check this box to receive high priority notifications at this contact.  
**Attendance** : Check this box to receive attendance notifications at this contact.  
**Behavior** : Check this box to receive behavior messages at this contact.  
**General** : Check this box to receive general school notifications from the District at this contact.  
**Food Service** : Check this box to receive food services notifications at this contact.  
**Teacher** : Check this box to receive grade and assignment notifications from teachers at this contact.  
**Private** : Check this box to mark this number as private. **WARNING:** Checking this box will prevent you from receiving any notifications at this contact, including emergency notifications.

< Previous

Cancel **Save/Continue**

- 如果已输入所有必填信息, 家长/监护人姓名旁的 **Completed** (已完成) 一栏中会出现一个绿色的 **Completed** (已完成) 标签。如需要, 可点击姓名进行编辑。如需在系统中添加其他家长或监护人, 请点击 **Add New Parent/Guardian** (添加新的家长/监护人), 并重复上述步骤。在申请中包含的所有家长/监护人旁都显示绿色标签时, 请点击 **Save/Continue** (保存/继续)。

FIRST NAME	LAST NAME	GENDER	COMPLETED
Sample	Parent	M	<b>COMPLETED</b>

Add New Parent/Legal Guardian

< Back **Save/Continue**

## 添加紧急联系人

**Emergency Contact** (紧急联系人) 是指学校在紧急情况下无法与家长/监护人取得联系时应联系的人员。填写此部分时, 您无需重新输入已在之前页面内输入的任何家长或监护人信息。就紧急情况下的联系优先级而言, 这些联系人都排在家长/监护人之后。必须确定至少一名紧急联系人, 申请最多可以包括四名紧急联系人。

1. 将加载 **Emergency Contact** (紧急联系人) 页面。点击 **Add New Emergency Contact** (添加新的紧急联系人)。此时将弹出一个窗口, 提示您将输入紧急联系人信息。点击 **OK** (确认)。

**Emergency Contact**

Estimated Completion Time: 5 Minutes

FIRST NAME	LAST NAME	GENDER	COMPLETED
No records available.			

In order to help prevent the creation of duplicate records, please do not create new records in this section for the following people:

FULL NAME	REASON
Sample Parent	Already in this application as a Parent/Guardian

Add New Emergency Contact

The maximum number of emergency contacts is 4

2. 输入您孩子紧急联系人的人口统计信息。点击 **Next** (下一步)。

**Contact Name: Sample Contact**

Demographics

Please complete the following information for each emergency contact for your student.

Persons listed as Emergency Contacts will be contacted in the case of an emergency if the Parent or Legal Guardian cannot be reached.

First Name: \*

Middle Name:

Last Name: \*

Suffix:

Gender: \*

Next >

3. 输入该人员的联系信息。需要输入至少一个电话号码。点击 **Save/Continue** (保存/继续)。

4. **Emergency Contact (紧急联系人)** 页面将刷新。
- 如果已输入所有必填信息，则紧急联系人姓名旁的 **Completed (已完成)** 一栏中会出现一个绿色的 **Completed (已完成)** 标签。
  - 点击姓名以编辑联系人。
  - 如需添加其他紧急联系人，请点击 **Add New Emergency Contact (添加新的紧急联系人)**，然后重复上述步骤。当申请中包含的所有紧急联系人旁边都显示绿色的标签时，请点击 **Save/Continue (保存/继续)**。

## 添加学生信息

在此部分，您要为注册学生输入重要信息。请记住，每份申请只能包含一名学生。您必须为希望注册的每一个学龄儿童单独提交申请。包含超过一个儿童的申请将被拒绝，且必须重新正确提交。在填写这个部分时，您将被要求上传学生的证明文件，以完成注册程序。有关所需文件的更多信息，请访问学生注册与安置办公室网站 (<https://www.philasd.org/studentplacement/registration/>) 查看。

1. 点击 **Add New Student** (添加新的学生) 以继续。

**Student**

Estimated Completion Time: 30 Minutes

FIRST NAME	LAST NAME	GENDER	SCHOOL	COMPLETED
No records available.				

In order to help prevent the creation of duplicate records, please do not create new records in this section for the following people:

FULL NAME	REASON
Sample Parent	Already in this application as a Parent/Guardian
Sample Contact	Already in this application as an Emergency Contact

Add New Student

< Back

2. 将显示学生人口统计部分，这个部分包含了与姓名和性别认同有关的重要政策信息。请仔细浏览这些信息。

**Demographics**

Please enter your student's information below. The student's name should be entered exactly as it appears on the birth certificate. If your student has two last names, please enter both in the Last Name field.

**Preferred Identifiers (Policy 252):** Students who wish to identify using a different preferred name and/or gender can communicate their preference to the Office of Student Rights and Responsibilities **after** registering with their legal information. [Click here](#) to fill out the preferred name/gender update form.

For further resources and support, visit the [Office of Student Rights and Responsibilities website](#).

3. 在以下区间输入所需的学生人口统计信息，以及任何可能与学生相关的其他信息。根据您提供的地址和在这个部分标注的年级，系统将在此页面上列出申请将被提交至的这所邻近学校。点击 **Next** (下一步)。

Legal First Name: \* Tracy

Gender: \* Female

Enrollment Grade: \* Kindergarten

Legal Middle Name:

Date of Birth: \* 08/08/2020

Legal Last Name: \* Ross

Date Entered U.S.: month/day/year

Suffix:

Country of Birth: \* United States

Assigned school is:  
Waring, Laura W. ES

**School Assignment Information**

The student's neighborhood school will be **automatically assigned** based on the listed primary home address.

If no neighborhood school is found, please continue this registration. The Office of Student Enrollment and Placement will contact you about your student's school assignment.

Residents within the boundaries of the Kensington Complex will be contacted by the school team to discuss all placement options in the Kensington High Schools.

Next >

**请注意:** 如果没有显示邻近学校, 请继续完成线上申请。学生注册与安置办公室会与您联系, 通知您孩子的学校安排。

4. 输入您孩子的 Race/Ethnicity (种族/族裔信息)。从下拉菜单中选择 Yes (是) 或 No (否), 说明学生是否为 Hispanic/Latino (拉美裔/拉丁裔)。接着, 勾选所有适用的复选框。点击 **Next (下一步)**。

**Race/Ethnicity**

Hispanic/Latino? \* No

Please check all that apply.

**Note:** If the Hispanic/Latino section was marked **No**, at least **one (1)** of the below options is required. \*

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

< Previous Next >

**请注意:** 如果您在是否为 *Hispanic/Latino* (拉美裔/拉丁裔) 的下拉菜单中选择了 *No* (否), 那么您需要从列表中至少勾选一个选项。

5. 勾选相应的复选框, 说明您的住房状况。点击 **Next (下一步)**。

**Housing**

In this next section, please share information about your current housing.

In some instances, you may be entitled to supports and services under the federal McKinney-Vento Act which supports the enrollment and education of students who may be experiencing housing challenges. The School District can help connect you to these services if you qualify.

**Note:** This information is **confidential** and will not impact your registration application.

Rent

Own

Living with family/others

Living with family/others due to hardship

Child in the custody of a child welfare agency

Living in hotel/motel due to hardship

Child NOT living with their parent/legal guardian (known as "unaccompanied youth")

Living in shelter or transitional housing

Other homeless situation

< Previous    Next >

6. 从 *Relationship*(关系)下拉菜单中选择相应选项, 说明每个家长/监护人与学生的关系。

**Relationships - Parent/Legal Guardian**

Keeping you updated about your child throughout the school year and in the event of a...

For each person listed below, please indicate their relationship to the student, whether...

Also indicate the order that the school should contact each person listed in the event of...

**Note:** At least one (1) person must be marked as "Guardian".

NAME	RELATIONSHIP *	GUARDIAN
SAMPLE PARENT	<!-- No Relationship-->	

Description of Contact Preferences

**Guardian** : Checking this box will flag this person as the primary contact for the student.

**Mailing** : Checking this box means you will receive all correspondence from the school district via this person.

**Portal** : Checking this box will allow you to access the student's information through the district's parent portal.

**Messenger** : Checking this box means you will receive all communication from the school district via this person's email address.

**Secondary Household** : Checking this box will allow you to add this person as a secondary household member.

**Emergency Contact Order** : Setting this number will determine the order of emergency contacts in the event of an emergency.

<!-- No Relationship--> N/A

< Previous    Next >

7. 联系偏好通过勾选 *Guardian* (监护人)、*Mailing* (邮件)、*Portal* (门户) 和 *Messenger* (通讯) 复选框确认。这些选项均为默认勾选。在 *Emergency Contact*

*Order* (紧急联系顺序) 下拉菜单中指定一个数字, 以说明学校工作人员在紧急情况下与联系人联系的顺序。点击 **Next** (下一步)。

NAME	RELATIONSHIP *	GUARDIAN	MAILING	PORTAL	MESSENGER	SECONDARY HOUSEHOLD	EMERGENCY CONTACT ORDER *
SAMPLE PARENT	Father	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		1

Description of Contact Preferences  
**Guardian** : Checking this box will flag this person as legal guardian to the student.  
**Mailing** : Checking this box means you want to receive information via the U.S. Postal Service.  
**Portal** : Checking this box will allow you to directly view child's information online via the parent Portal. If you are new to the parent Portal, please create an account after your child is fully enrolled.  
**Messenger** : Checking this box means you want to receive messages from the District's electronic messaging system.  
**Secondary Household** : Checking this box means this individual is part of a Secondary Household.  
**Emergency Contact Order** : Setting this number will determine the order in which emergency contact(s) are notified. Note: Parents/legal guardians should start with a sequence of 1.  
 <!-- No Relationship--> N/A

< Previous    Next >

Relationships - Emergency Contacts

- 从 *Relationship* (关系) 下拉菜单中选择相应选项, 说明每位紧急联系人与学生的关系。然后, 在 *Emergency Contact Order* (紧急联系顺序) 下拉菜单中指定一个优先顺序。点击 **Next** (下一步)。

Relationships - Emergency Contacts

Please enter the relationship to the student of each contact listed below as well as the emergency contact order.  
 In the event of an emergency, the school will use this order to notify emergency contacts.

A minimum of 1 emergency contact is required.

NAME	RELATIONSHIP *	EMERGENCY CONTACT ORDER *
SAMPLE CONTACT	Aunt/Uncle	2

Description of Contact Preferences  
**Emergency Contact Order** : Setting this number will determine the order in which emergency contact(s) are notified. Note: Parents/legal guardians should start with a sequence of 1.  
 <!--No Relationship--> : Marking this checkbox will indicate that this person does not share a relationship to the student. The relationship will be ended if one exists.

< Previous    Next >

9. 在此页面上的所有必选下拉菜单中选择 **Yes** (是) 或 **No** (否), 提供有关您孩子的注册历史信息, 接着点击 **proceed** (继续)。

**Enrollment History and Student Services**

Understanding where your child was previously enrolled (when applicable) and the types of special student services they received will help us prepare to successfully support your child once they start school with us.

Please complete the section below so we can access your child's prior educational records as needed.

**Note:** Enrollment is **not contingent nor affected** by providing special education documentation.

Did your student attend pre-kindergarten? \*  
Yes

Did your student attend kindergarten? \*  
No

Type of school last attended:  
[Dropdown menu]

Name of school last attended:  
[Text input field]

City of school last attended:  
[Text input field]

10. 在此页面上的所有必选下拉菜单中选择 **Yes** (是) 或 **No** (否), 以说明您孩子之前接受过哪些服务, 接着点击 **Next** (下一步)。

**Student Services Information:** Click here to review the [Office of Specialized Service's resources and supports.](#)

Has your student ever received special education services in PA or another state? \*  
No

If yes, what state did your student receive special education services in?  
[Dropdown menu]

Does your student have a current Individualized Education Plan ("IEP")? \*  
No

Does your student have a current evaluation report? \*  
No

Current Evaluation Report Date:  
month/day/year [Calendar icon]

Was your student ever enrolled in an Early Intervention Program ("EIP")?  
[Click here for more information on EIPs.](#) \*  
No

Does your student have a current 504 plan? \*  
No

Has your student previously received gifted or talented services? \*  
No

< Previous **Next** >

11. 回答有关您孩子的医疗信息的问题。完成所有必填的区域。继续向下划动以确保您完成所有的部分。

**Medical Information**

Each school in our District has an assigned nurse to help support your child's medical needs during the school day. The District may also be able to connect you with no/low cost City of Philadelphia resources to further support your child's medical needs.

Please take a moment to provide the medical information requested below.

**Note:** Enrollment is **not contingent nor affected** by providing medical information.

Name of Child's Doctor/Clinic:

Doctor/Clinic Phone Number:

Medical Insurance:

Insurance Company Name:

Insurance Policy Number:

Does your child wear glasses? \*

Does your child wear a hearing aid? \*

Does your child have seizures? \*

Does your child have diabetes? \*

Does your child have asthma? \*

Has your child been diagnosed with attention-deficit/hyperactivity disorder ("ADHD")?

Does your child have any allergies? \*

Do you give the school nurse permission to give your child acetaminophen (Tylenol®)? \*

Do you give the school nurse permission to give your child ibuprofen (Advil®/Motrin®)? \*

12. 说明学生目前是否服用药物。如果从下拉菜单中选择 **No** (否), 则请继续回答后续问题。如果从下拉菜单中选择 **Yes** (是), 则会显示多个区间, 您可以在其中输入孩子服用的药物。

<b>Does your child take any medications? *</b>	
Yes ▾	
<b>First Medication</b>	
Medication Name:	Adderall
Amount/Dosage:	30 Mg
Frequency/Time:	Once Daily
Medication Reason:	ADHD

**请注意:** 您只能在此页面上输入三种药物。如果您的学生需要其他的药物, 请在学生入学后联系校医, 分享其他药物的信息。

13. 阅读以下声明。第一项声明讨论使用紧急药物的许可问题, 包括 Albuterol (舒喘宁) 和 EpiPen (肾上腺素注射笔)。

<p>Your signature gives permission for:</p> <ul style="list-style-type: none"><li>• 1. administration of any listed medications by SDP school nurses during school hours, field trips, and after school activities;</li><li>• 2. administration of emergency treatment; and</li><li>• 3. communication between SDP school nurses and your child's healthcare provider regarding your child's care on an "as needed" basis.</li></ul> <p>The emergency medical and/or dental care, including administration of emergency medications including stock Albuterol inhalers and EpiPens, which may be necessary to preserve the life of my child or to prevent impairment of their health in the event that time does not permit obtaining my personal consent for such care. I understand that I will be contacted as soon as possible, and will assume responsibility for giving permission for on-going care.</p> <p>Emergency Treatment Authorization Signature: *</p> <p>Sample Parent</p>
--

14. 第二份声明讨论使用防晒霜的许可。在防晒霜授权签名 *Sunscreen Authorization Signature* 框中键入您的姓名。接着，点击 **Next** (下一步)。

Sunscreen Statement Parents/legal guardians may choose to supply their child with a non-aerosol topical sunscreen approved by the U.S. Food and Drug Administration.

The school may cancel or restrict the possession, application, or use of a non-aerosol topical sunscreen product by a student if any of the following occurs:  
The student fails to comply with school rules concerning the possession, application, or use of the non-aerosol topical sunscreen product.  
The student shows an unwillingness or inability to safeguard the non-aerosol topical sunscreen product from access by other students.  
*In the event of a cancellation or restriction, the school shall provide written notice to the parent/legal guardian.*

In order for a student to apply sunscreen during school hours, at a school-sponsored activity, or while under the supervision of school personnel, the parent/guardian acknowledges via the Sunscreen Authorization Signature that:

1. the school is not responsible for ensuring sunscreen is applied by the student; and
2. the student has demonstrated that they are able to self-apply the sunscreen.

Sunscreen Authorization Signature:

Sample Parent

15. 通过在下拉菜单中选择 **Yes** (是) 或 **No** (否)，说明您的孩子在所列出的每种情况下使用的语言。根据所提供的回答，您可能被要求确认不同的语言。点击 **Next** (下一步)。

Language Information

The School District of Philadelphia offers a wide range of language support services for students whose primary spoken language is not English. Completing the information below will help us determine if your child should receive English as a Second Language services to support their academic success.

Does the family communicate in English most of the time while at home? \*

Yes

Does the parent(s)/guardian(s) communicate in English most of the time to the student? \*

Yes

Does the student communicate in English most of the time to their parent(s)/guardian(s)? \*

Yes

Does the student communicate in English most of the time to their brothers/sisters? \*

Yes

Is English the student's most frequently used language? \*

Yes

Has your student ever received English as a Second Language ("ESL") or English Language Learner ("ELL") services? \*

No

< Previous **Next** >

16. 通过在下拉菜单中选择 **Yes** (是) 或 **No** (否), 说明是否有任何学龄兄弟姐妹与您的孩子一同住在常住家庭。如果选择为 **Yes** 是, 请输入有关这些学生的信息。您最多可以在一份申请中确认六个兄弟姐妹。点击 **Next** (下一步)。

**School Age Siblings in Same Household**

Does the Student have any school age siblings who are currently living at the address provided? \*

Yes

Please enter information for all school age children, ages five and above, who are currently living at the provided address.

**Note:** This page is not used to register any additional students.  
If you need to register any additional students, please submit this application first, and then complete a new application for each additional student.

**First Sibling**

First Name: \*

\_\_\_\_\_

Last Name: \*

\_\_\_\_\_

First Sibling Date of Birth: \*

month/day/year

Current School:

\_\_\_\_\_

Current Grade:

\_\_\_\_\_

Student ID Number (if available):

\_\_\_\_\_

17. **Parental Registration Statement section** (家长注册声明) 部分询问的是您的孩子是否有违规违纪史。这些问题为必答。接着, 输入您的姓名, 表示您宣誓或确认您所提供的信息据您所知是准确的。点击 **Next** (下一步)。

**Student Suspension/Expulsion Information (Parental Registration Statement)**

Parental Registration Statement Pennsylvania School Code 13-1304-A states in part:  
Prior to admission to any school entity, the parent, guardian or other person having control or charge of a student shall, upon registration provide a sworn statement or affirmation stating whether the pupil was previously or is presently suspended or expelled from any public or private school of this Commonwealth or any other state for an action of offense involving a weapon, alcohol or drugs, or for the willful infliction of injury to another person or for any act of violence committed on school property.

Is your child currently suspended or expelled from any public or private school of this Commonwealth or any other state for an act or offense involving weapons, alcohol or drugs, or for the willful infliction of injury to another person or for any act of violence committed on school property? \*

No

Was your child previously suspended or expelled from any public or private school of this Commonwealth or any other state for an act or offense involving weapons, alcohol or drugs, or for the willful infliction of injury to another person or for any act of violence committed on school property? \*

No

By typing your name into the box you hereby swear or affirm to the information provided and attest that you make this statement subject to the penalties of 24 P.S. 13-1304-A (b) and 18 Pa. C.S.A 4904, relating to unsworn falsification to authorities, and the facts contained herein are true and correct to the best of my knowledge, information and belief. \*

Sample Parent

< Previous    Next >

18. 查看 *Release of Directory Information* (名册信息披露) 声明, 然后从下拉菜单中选择 **Yes** (是) 或 **No** (否), 表明您是否允许学区披露您孩子的信息。如果选择 **Yes** (是), 则会显示更多选项供您选择。选择完毕后, 请在 *Signature Authorization* (签名授权) 框中输入您的姓名。点击 **Next** (下一步)。

**Release of Directory Information (FERPA)**

Protecting the confidentiality of your child's educational information is one of our most important responsibilities.

Per the federal Family Educational Rights and Privacy Act (FERPA), the School District of Philadelphia cannot share personal information from your child's education records with others without your written approval, with one exception called "directory information." This information may be disclosed without written consent unless you advise the District otherwise.

Directory information is a limited category of student information that is intended for general use in school publications such as yearbooks, playbills, school newsletters, honor roll or other recognition lists and graduation programs. It may also be made available upon request to qualified outside organizations which include, but are not limited to: scholarship providers, trade/technical schools, and potential employers.

[Click here](#) to review the full list of directory information category as well as the District's FERPA Notice of Directory Information.

**Directory information will not be provided to commercial enterprises.**

If you want to restrict how your child's directory information is used or shared, please indicate so by checking the appropriate box below and typing your name in the signature box authorizing your selection.

Do you want to deny or restrict the release of directory information for your student?  
*(If so, please select Yes here to indicate which information you would like to restrict. \**

Yes

Select one of the following:

Do not release my student's directory information at any time.  
> No information shall be provided for school publications, school activities, trade schools, scholarship providers, or employers.

Do not release my student's directory information at any time except for school publications, school activities and to qualified outside organizations.

Do not release my student's directory information at any time except for school publications and school activities.

Do not release my student's directory information to military recruiters (grades 11-12 only).

**PPRA Notice**

The Protection of Pupil Rights Amendment (PPRA), 20 U.S.C 1232h, allows you to opt your child out of participating in certain school activities. [Click here](#) to view the District's PPRA notice. Please click here to view the District's PPRA notice.

Please type your name in the box authorizing your indicated Release of Directory Information options.

Sample Parent

< Previous    Next >

19. 下一步是上传文件，以验证您孩子的出生日期、地址证明，并提供孩子所在年龄段的符合学区标准的最新疫苗接种证明。选择上传房契、租约或按揭声明。这将影响您需要上传的住址证明数量（2份或3份）。

**Upload Required Documents**

The School District's online registration system will not let you submit your student's registration without the following required items:

1. Proof of your student's age
2. Two (2) documents showing your address
3. Current Shot (Immunization) Records. Obtain these from your child's physician if you do not have a copy.

Please be advised that there is a file size limit of 10MB. The following special characters cannot be included in document names, or they will not upload:  
! , [ ] { } ( ) ! ; \* \* ? < > : / \ Tab, LF, CR

**Deed, Lease, or Mortgage Statement will be uploaded. \***

Yes, I will upload my Deed, Lease, or Mortgage Statement

No, I will not upload my Deed, Lease, or Mortgage Statement

[Click here for instructions on how to upload documents with an Android device.](#)

[Click here for instructions on how to upload documents with an iPhone.](#)

[Click here for information on required Immunizations.](#)

[Click here to view our Registration Guidelines](#)

If you have any notes or comments about the documents you uploaded, please write them here:

**请注意:** 家长可在备注框中备注希望告知校内工作人员的其他说明。如果孩子正在经历无家可归或寄养或其他特殊状况，请务必在备注框中说明。

20. 点击相应按钮上传文件。接着点击 **Save/Continue** (保存/继续)。

- [点击此处查看 iPhone 上传操作说明视频。](#)
- [点击此处查看安卓手机上传操作说明视频。](#)

\*  
Upload First Proof of Residency Document Drop files here to select

\*  
Upload Second Proof of Residency Document Drop files here to select

**Acceptable Proof of Age documents are:**  
Birth Certificate  
Baptismal Certificate  
Valid Passport  
**Acceptable Residency Documentation includes:**  
Deed  
Valid Department of Transportation (DOT) identification card  
Valid Government Issued ID with current address  
Mortgage settlement sheet  
Current credit card bill  
Current utility bill (gas, electric, cable, telephone)  
Recent vehicle registration  
Recent property tax bill  
Voter Registration Card showing current address  
Valid driver's license or change of address card with your current address  
Letter from Social Security Office with current address  
IRS Statement or other wage and tax statements (e.g. W2, 1040, 1099)  
Letter from Public Assistance Office with current address  
Recent Employer Pay Stub showing current address  
Original lease with names(s) of parents/legal guardians and children  
Signed property sales agreement, followed by original copy of settlement papers within 45 calendar days of settlement  
Foster care/childcare and DHS letters are acceptable for registration when a student is in the care of a foster/child care agency  
Shelter placement or residency letters are acceptable for homeless students  
PLEASE NOTE: One (1) of your residency documents must display a date from the last 90 days.

\*  
Upload Proof of Your Student's Age Drop files here to select

\*  
Upload Student Immunization Records Drop files here to select

**\*Optional**  
Upload Transcript or Report Card Drop files here to select

**\*Optional**  
Upload Photo ID of Parent/Guardian Drop files here to select

**\*Optional**  
Upload Student Special Ed / IEP Documentation Drop files here to select

**\*Optional**  
Upload Second Immunization Records Document Drop files here to select

< Previous

Cancel **Save/Continue**

21. 输入所有信息后, 将显示绿色 **Completed** (已完成) 标签, 表示此部分已完成, 您可以点击 **Save/Continue** (保存/继续)。

Student

Estimated Completion Time: 30 Minutes

FIRST NAME	LAST NAME	GENDER	SCHOOL	COMPLETED
Tracy	Ross	F	Waring, Laura W. ES	<span style="border: 1px solid green; border-radius: 5px; padding: 2px 5px;">COMPLETED</span>

In order to help prevent the creation of duplicate records, please do not create new records in this section for the following people:

FULL NAME	REASON
Sample Parent	Already in this application as a Parent/Guardian
Sample Contact	Already in this application as an Emergency Contact

Add New Student

< Back
Save/Continue

**请注意:** 不允许在一个申请中为多名学生进行注册。请勿点击 **Add New Student** (添加新的学生) 按钮。超过一名学生的申请将被拒绝。

22. 点击 **Click Here To Sign** (点击此处签名)。



**PLEASE NOTE:** Prior to submitting your application, you may verify all of the data you have entered by going back to the area in question or clicking on the PDF link below.

Your information is not submitted until you click the submit button below. You will receive an email notification that your application was received after clicking the submit button.

Please download a PDF Summary of your application below to print and save for your records. If you experience any difficulties in completing the online registration process, you will need this document.

Back
Application Summary PDF
Submit

23. 提供电子签名, 请点击 **Sign** (签名)。

Confirm Signature ×

By selecting Sign, I agree that the below signature will be the electronic representation of my signature, just the same as a pen-and-paper signature.

sample parent

Sign
Decline

24. 直到您点击 **Submit (提交)** 按钮，您的申请才算提交。在点击 **Submit (提交)** 前，请先查看声明。

Your information is not submitted until you click the submit button below. You will receive an email notification that your application was received after clicking the submit button.

Please download a PDF Summary of your application below to print and save for your records. If you experience any difficulties in completing the online registration process, you will need this document.

[Back](#) [Application Summary PDF](#) [Submit](#)

25. 提交申请后，您可以用 PDF 格式查看申请，并将其保存到硬盘中或打印备份。

Thank you for completing Online Registration! For a PDF copy of the submitted data, please click the link below.

[Application Summary PDF](#)

## 返回已有申请

如果在填写一份申请时需要暂停，您可以在晚些时候返回，继续您的申请。届时您可以完成并提交申请。提交申请后，学校工作人员将对申请进行仔细审核，以确保其完整性和准确性。如果发现申请有任何未完成的部分，您将会收到电子邮件通知。在该过程中，整个申请将被“unsubmitted（取消提交）”。**被取消提交的申请中仍包含您最初输入的所有信息。您不需要使用“blank（空白）”的申请表格重新开始进行申请。**

如果申请被取消提交，您将收到一封来自学校的电子邮件，告知您存在以下情况之一：

- 您上传的住址证明文件不符合要求
- 您上传的年龄证明文件不符合要求
- 您的孩子在申请中所示学年的9月1日或之前不满5岁（仅针对幼儿园 kindergarten）
- 孩子的疫苗接种记录不完整

您可以重新提交附有符合要求文件的申请。如有任何疑问，请发送邮件至 [osep@philasd.org](mailto:osep@philasd.org)，联系学生注册和安置办公室。

1. 如需返回您的申请，请通过访问学生注册与安置办公室的网站 ([philasd.org/studentplacement](http://philasd.org/studentplacement))，使用线上注册工具。点击标注 **New Student Registration（新生注册）** 的按钮。

OFFICE OF  
**Student Enrollment & Placement**

440 N. Broad Street

215-400-4290 Suite: 111, 1st Floor

Home Enroll & Register School Selection Process Renaissance Charter Contact

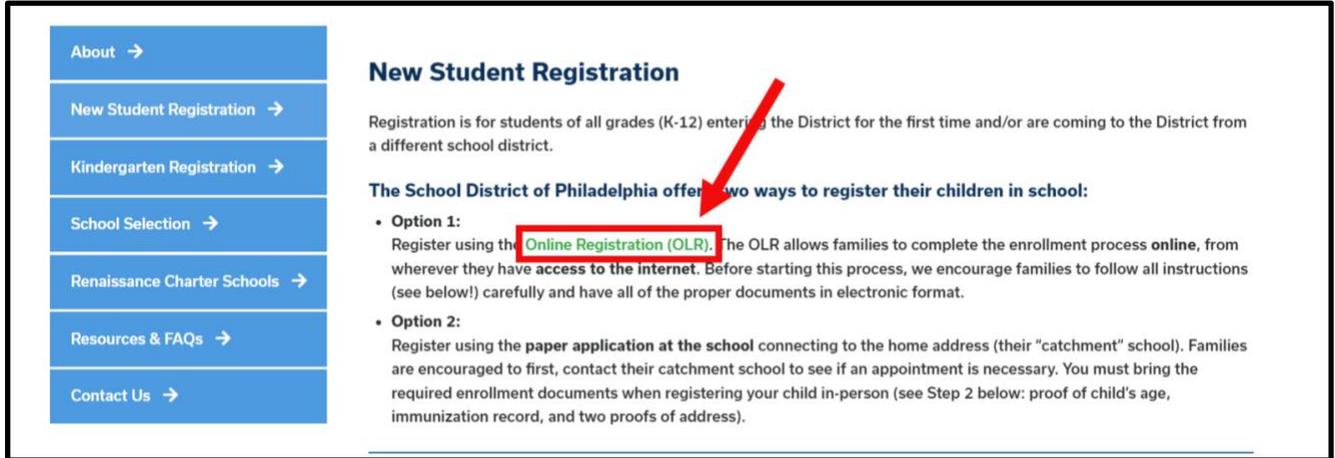
**Student Enrollment & Placement**

The Office of Student Enrollment and Placement supports K-12 children and families in accessing the District's educational programs and services.

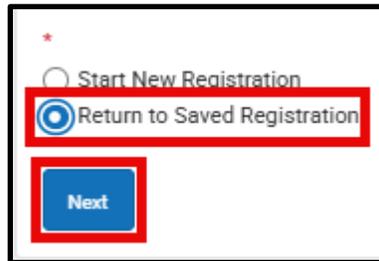
**About Student Enrollment and Placement**

The School District of Philadelphia has a clear vision; for all children to have access to a great school close to where they live. The mission of the Office of Student Enrollment and Placement is to support K-12 children and families in enrollment, registration, and school placement. Our goal is to ensure equitable access for all students across our K-12 schools.

2. **New Student Registration** (新生注册) 页面含多种资源, 供准备为学生注册下一学年的家长和监护人使用, 包括所需文件的说明和如何在线上为孩子注册的指南。请浏览这些资料。开始为您的孩子进行线上注册, 请点击绿色的 **Online Registration** (线上注册) (OLR) 链接:



3. 将显示 **Online Registration Welcome Screen** (线上注册欢迎页面)。点击 **Return to Saved Registration** (返回已保存注册) 选项前的按钮。然后点击 **Next** (下一步)。



4. 要访问已保存的注册，请输入最初提交申请人的以下信息，与最初输入的信息需完全一致：

- 名字和姓氏
- 出生日期
- 电子邮箱
- 关于兄弟姐妹的问题 (是/否)
- 申请编号

Parent/Legal Guardian First Name \*

Sample

Parent/Legal Guardian Last Name \*

Parent

Parent/Legal Guardian Date of Birth (MM/DD/YYYY) \*

07/07/1977

Parent/Legal Guardian Email Address

parent@email.com

Does your child have siblings currently enrolled at SDP?  
Please select 'Yes' in the dropdown if there are any students in your household who are currently enrolled in a Philadelphia District school. They will need to be listed in the 'School-Age Sibling' section of the application.  
If there are no siblings, please select 'No'. \*

No

Application Number \*

73068

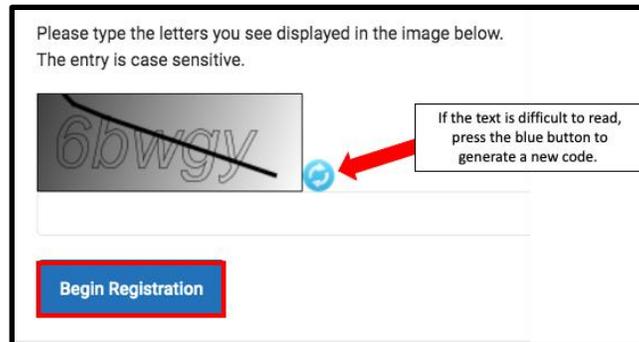
**请注意:** 如果上述任何信息没有完全按照原来的方式输入，页面底部将显示错误提示。请仔细检查每个字段，确保准确无误。

2fpmb

This field is required

Begin Registration

5. 完整输入验证码并点击 **Begin Registration** (**开始注册**)。检查您的申请，确保输入准确信息，并在正确的位置上传清晰可见的文件。在所有需要的信息/文件都成功上传后重新提交。



Please type the letters you see displayed in the image below.  
The entry is case sensitive.

6bwwgy

If the text is difficult to read, press the blue button to generate a new code.

Begin Registration

The image shows a registration form with a CAPTCHA challenge. The CAPTCHA image displays the text '6bwwgy' with a diagonal line through it. A blue button with a refresh icon is located to the right of the CAPTCHA image. A red arrow points from a text box to this button. The text box contains the instruction: 'If the text is difficult to read, press the blue button to generate a new code.' Below the CAPTCHA image is an empty text input field. At the bottom of the form is a blue button with the text 'Begin Registration'.