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？

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？ [1]
... 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？ [2]
	... 当前在一所 SDP 学校就读？ [3]
是！ 继续进行线上注册。	**否。** 请查看以下说明，了解详细信息。

如果线上注册不适合您：

[1] *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。*
[2] *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。*
[3] *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) 使用线上注册工具。点击标有"*New Student Registration（新生注册）*"的蓝色按钮。

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:

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)。

3. 选择您希望注册的学年。然后，点击 *Next*（*下一步*）。

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。

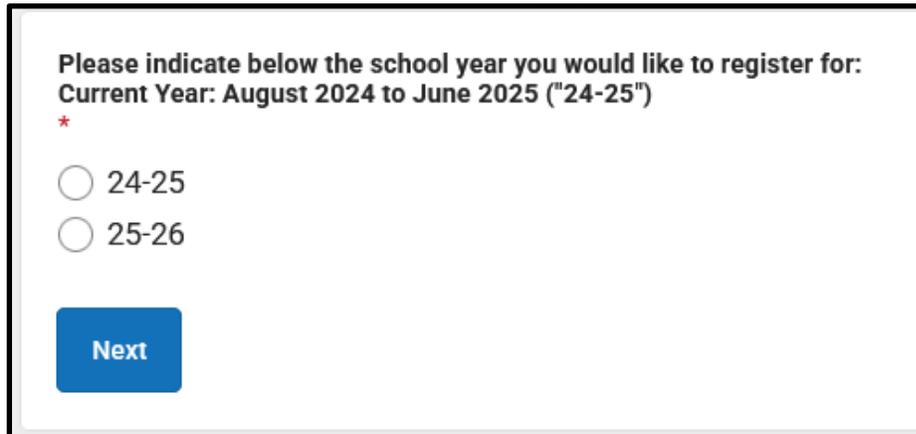5. 输入您的名字和姓氏，您的出生日期和您的电子邮箱地址。输入您的电子邮箱地址以获取有关您申请状态的重要更新。使用下拉菜单，通过选择 Yes（是）或 No（否）来表明您家中是否有任何学生当前在学区学校就读。

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

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.

6bwgy

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

Begin Registration

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*）。
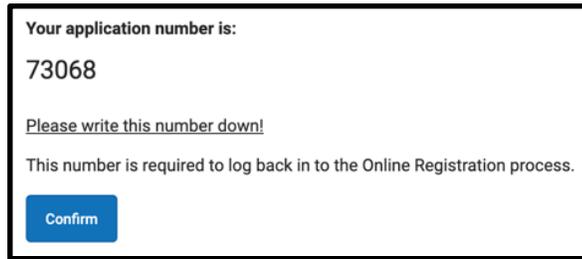
Your application number is:

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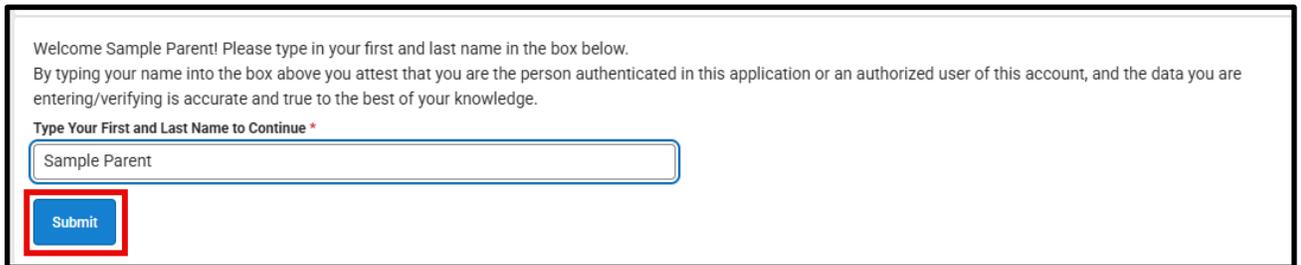
Welcome Sample Parent! Please type in your first and last name in the box below.
By typing your name into the box above you attest that you are the person authenticated in this application or an authorized user of this account, and the data you are entering/verifying is accurate and true to the best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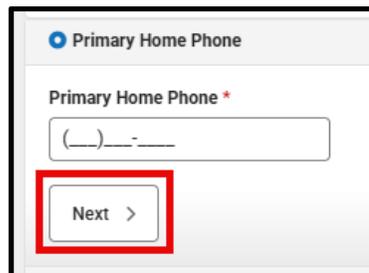
○ Primary Home Phone

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*

街道。如果系统中包含您的住址，将显示在下方的方框中。点击您的住址，其余字段将自动填充。点击 Save/Continue（保存/继续）。

添加家长和监护人

在这个部分您将提供此学生的家长/监护人的人口统计和联系信息。申请中可包含多个家长/监护人，但必须单独添加每一个家长/监护人。在添加其他家长/监护人之前，将首先提示您提供用于创建申请账号的家长/监护人的信息。

1. 将出现一个弹窗，提示您将输入家长/监护人信息。点击 OK（确认）。

2. 输入您孩子的每位家长/监护人的相应信息。点击 Next（下一步）。

Parent/Legal Guardian Name: Sample Parent

✅ Demographics

Enter the parent/legal guardian information below.

First Name: *

Sample

Middle Name:

Last Name: *

Parent

Suffix:

▼

Date of Birth:

07/07/1977 📅

Gender: *

Male ▼

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

▼

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

No ▼

Does this person live at the address listed below? *

Yes ▼

440 N Broad St
Philadelphia, PA 19130-4015

Next >

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）*。

4. 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）*。

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*）。

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

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。
   a. 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。
   b. 点击姓名以编辑联系人。
   c. 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。

O 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*）。

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**）。

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**）。

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。

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*

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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）。

8. 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）。

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）。

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*）。

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? *

[No   ▼]

Does your child wear a hearing aid? *

[No   ▼]

Does your child have seizures? *

[No   ▼]

Does your child have diabetes? *

[No   ▼]

Does your child have asthma? *

[No   ▼]

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

[Yes   ▼]

Does your child have any allergies? *

[No   ▼]

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

[Yes   ▼]

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

[Yes   ▼]

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。

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）。

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）。

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）。

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 authorization your selection.

Do you want to deny or restrict the release of directory information for your student? *

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 >

21

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）。

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 。](#)

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*

| Upload First Proof of Residency Document | Drop files here to select |

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| 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

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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	COMPLETED	>

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*）。

Click Here To Sign

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，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)，使用线上注册工具。点击标注 New Student Registration（新生注册）的按钮。

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<u>完全一致</u>:
   - 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

<u>请注意:</u> 如果上述任何信息没有<u>完全按照</u>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。

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。