

# SIS: Instrucciones para padres/encargados para matricularse en línea

## Tabla de contenido

Antes de empezar: ¿Le conviene usar la matrícula en línea?	1
Navegación:	1
Cómo empezar una matrícula en línea	2
Cómo agregar información sobre el grupo familiar principal	5
Cómo agregar a los padres y encargados	6
Cómo agregar contactos de emergencia	8
Cómo agregar la información de la/el estudiante	10
Cómo acceder nuevamente a una solicitud	23

## Antes de empezar: ¿Le conviene usar la matrícula en línea?

Los padres o encargados legales pueden matricular a estudiantes desde kindergarten a 12º grado para el año escolar en curso o el próximo año, enviando solicitudes y documentación a través de la herramienta "Online Registration" ["Matrícula en línea"].

Si está registrando a su estudiante en el Distrito Escolar de Filadelfia [SDP, por sus siglas en inglés] por primera vez, o está registrando a su niña/o para kindergarten, tendrá que empezar el proceso aquí.

Revisemos algunas preguntas y veamos si la matrícula en línea es el camino apropiado para matricular a su estudiante.

Su estudiante...

... ¿está pasando de prekínder a kínder?	... ¿está postulando a una escuela fuera de su vecindario? <sup>1</sup>
... ¿es una/un estudiante nueva/o o está regresando a K-12 y NO está matriculada/o actualmente en una escuela del SDP?	... ¿está postulando a una escuela chárter? <sup>2</sup>
	... ¿está matriculada/o actualmente en una escuela del SDP? <sup>3</sup>
<b>¡Sí! Continúe con la Matrícula en Línea.</b>	<b>No. Vea las notas a continuación para más información.</b>

Si no le conviene la matrícula en línea:

<sup>1</sup> Visite la página web de [Matrícula y Asignación Estudiantil](#) para más información sobre cómo aplicar a una escuela fuera de su vecindario.

<sup>2</sup> Visite la página principal de la [Oficina para las escuelas Chárter](#) que tiene más información sobre las solicitudes para escuelas chárter.

<sup>3</sup> Comuníquese con la escuela de su vecindario para actualizar su información demográfica y de su grupo familiar.

La matrícula en línea consiste en cuatro secciones distintas y demora unos 45 minutos. Este proceso requiere adjuntar documentos.

## Navegación

1. Los padres y encargados pueden acceder a la matrícula en línea a través de la página web de la Oficina de Matrícula y Asignación Estudiantil ([philasd.org/studentplacement](http://philasd.org/studentplacement)). Haga clic en el botón azul que dice “*New Student Registration*” [Matrícula para Estudiantes Nuevos].

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. La página “*New Student Registration*” [Matrícula para Estudiantes Nuevos] incluye varios recursos para los padres y encargados que se están preparando para matricular a sus estudiantes en el próximo año escolar, incluyendo descripciones de los documentos que se requieren y una guía sobre cómo matricular a su estudiante en línea. Revise estos recursos. Para realizar la matrícula en línea de su estudiante, haga clic en el ícono verde que dice “*Online Registration (OLR)*”.

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:**

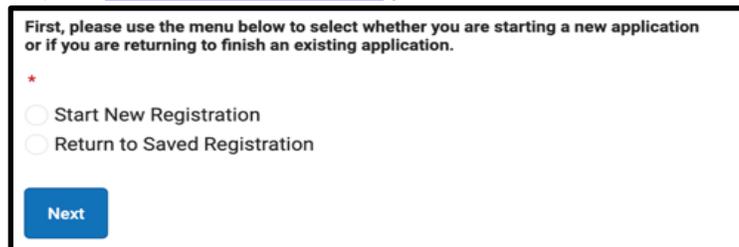
- **Option 1:**  
Register using the **Online Registration (OLR)**. The OLR allows families to complete the enrollment process online, from wherever they have access to the internet. Before starting this process, we encourage families to follow all instructions (see below!) carefully and have all of 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).

## **Para empezar una nueva matrícula en línea**

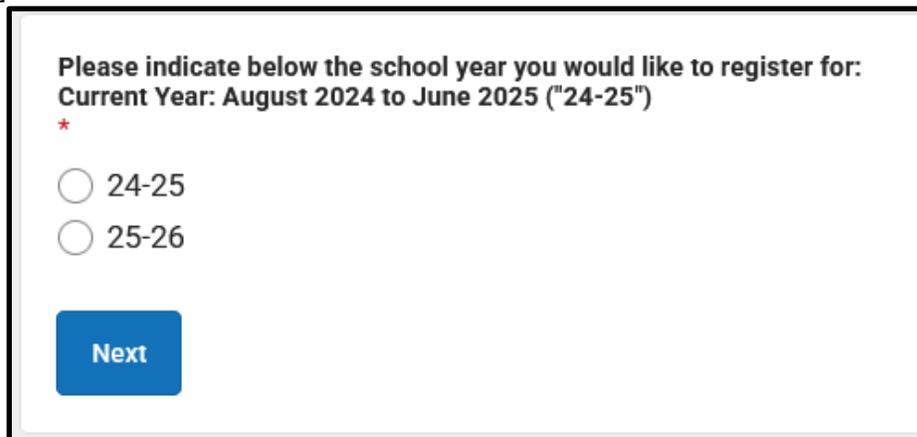
1. Se cargará la pantalla que dice “**Online Registration Welcome Screen**” [*Pantalla de bienvenida a la matrícula en línea*]. En la parte de arriba de la pantalla, haga clic en su idioma de preferencia para acceder a las versiones traducidas de la solicitud. El idioma predeterminado de la página es el inglés.



2. Para empezar una solicitud nueva, haga clic en el botón a la izquierda que dice “**Start New Registration**” [*Empezar una Matrícula Nueva*] para seleccionar esa opción. Luego, haga clic en “**Next**”, [*Continuar*]. (Vea [Volver a una solicitud](#) para editar una solicitud existente.)

A screenshot of a registration type 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, there are two radio button options: "Start New Registration" and "Return to Saved Registration". At the bottom left, there is a blue button labeled "Next".

3. Seleccione el año académico para el cual desea matricular. Luego, haga clic en “**Next**”, [*Continuar*].

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, there are two radio button options: "24-25" and "25-26". At the bottom left, there is a blue button labeled "Next".

Revise las indicaciones incluidas en esta página sobre la documentación necesaria y guarde la información para acceder a su solicitud en otro momento. Asegúrese que podrá adjuntar los documentos necesarios a su solicitud de Matrícula en Línea. A continuación,

desplácese hacia abajo para empezar a ingresar la información de la/del padre/madre/ encargada/o legal e iniciar su solicitud, ingrese su nombre y apellido, fecha de nacimiento y email. Ingrese su email para recibir actualizaciones importantes sobre el estado de su solicitud. Utilice el menú desplegable para indicar si hay o no estudiantes en su grupo familiar que estén matriculados actualmente en una escuela del Distrito, seleccionando “Yes” [Sí] o “No”

**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:

- Proof of your child's age
- Two (2) documents showing proof of your address.
- Immunization records ("shots")

If you cannot complete the entire application at this time, the following information will be required to re-access this application:

- 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)

*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. Diríjase al CAPTCHA en la parte inferior de la página, introduzca la secuencia de letras y números en el campo situado bajo la imagen. Hada clic en **“Begin Registration”** [Iniciar Solicitud].

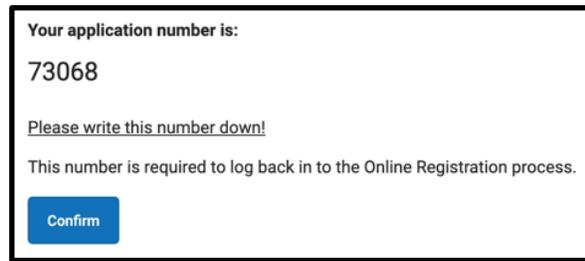
Please type the letters you see displayed in the image below.  
The entry is case sensitive.



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

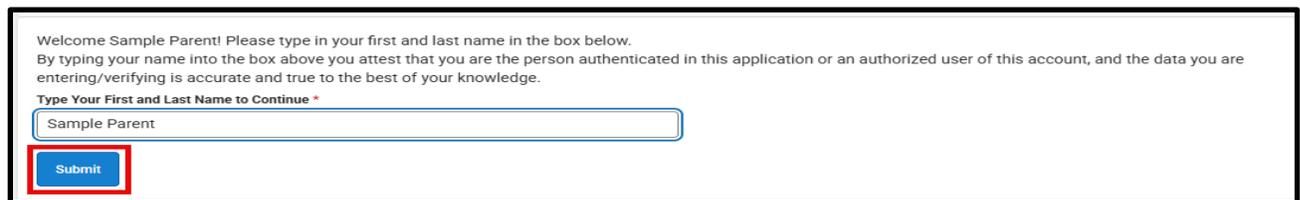
7. Aparecerá su número de solicitud. Anote este número, ya que lo necesitará para volver al sistema de matrícula en línea si por alguna razón necesita salir del proceso. Haga clic en **“Confirm”**.



Your application number is:  
73068  
Please write this number down!  
This number is required to log back in to the Online Registration process.  
Confirm

**TENGA EN CUENTA:** El número de solicitud se utiliza para realizar seguimiento a las matrículas en línea en todo el Distrito, y no refleja el número de matrículas en línea de una escuela específica. Necesitará este número para acceder a su solicitud en el futuro.

8. Se abrirá una nueva ventana en la que se le pedirá que confirme que usted es la/el madre/padre/encargada/o cuya información se ingresó en la pantalla anterior, o un usuario autorizado de esta cuenta, y que los datos que está proporcionando son exactos y verdaderos a su leal saber y entender. Introduzca su firma electrónica. Ingrese su nombre en el campo de entrada de texto y, luego use el ratón [mouse] para crear una firma electrónica firmando en la línea de abajo. Luego haga clic en “**Submit**” [Enviar].

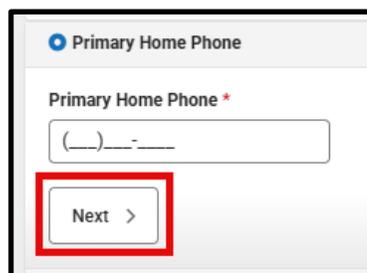


Welcome Sample Parent! Please type in your first and last name in the box below.  
By typing your name into the box above you attest that you are the person authenticated in this application or an authorized user of this account, and the data you are entering/verifying is accurate and true to the best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

### **Para agregar información sobre el grupo familiar principal**

Se abrirá la aplicación, empezando con la pestaña “**Student(s) Primary Household**” [Información del grupo familiar principal de la/del estudiante]. El término “*Family Household*” [Grupo familiar] se refiere al lugar donde su estudiante vive la mayor parte del tiempo. Si su estudiante también vive en otro grupo familiar, usted tendrá la oportunidad de proporcionar esa información en la sección de la solicitud correspondiente a los padres/encargados.

1. Ingrese el número de teléfono que desea asignar al grupo familiar principal de su estudiante. Los estudiantes solo pueden tener un grupo familiar principal, pero pueden tener varios grupos familiares secundarios. Podrá ingresar información sobre el grupo familiar secundario posteriormente, si es necesario. Después de ingresar el número, haga clic en “**Next**” [Continuar].



Primary Home Phone  
Primary Home Phone \*  
( ) - - - -  
Next >

2. Ingrese su dirección del hogar, ingresando el Número de la casa. Seleccione el punto cardinal (North, Northwest, South, Southwest, etc) del menú desplegable si se aplica. Ingrese la Calle.

Si su dirección existe en el sistema, aparecerá en el recuadro a continuación. Haga clic en su dirección y el resto de los campos se llenará automáticamente. Haga clic en **“Save/Continue”** [Guardar/Continuar].

Home Address

Please enter the student's home address below.

As you fill in the address, the system will automatically populate a list of valid addresses. Please select the correct address from this list.

If the address does not appear in the list, email the Office of Student Enrollment and Placement at [osep@philasd.org](mailto:osep@philasd.org). Please title the email "OLR: Missing Address" and include the primary home address and application number. In three (3) business days, we will notify you when the address is added to our system. You may then continue the registration process.

For example, 440 N Broad St, Philadelphia, PA 19130 would be entered as:  
House Number: 440  
Direction: N  
Street: Broad  
Tag: St  
etc.

House Number *	Direction	Street *	Tag (St, Blvd, etc.)	Apartment
440	North	Broad		

City *	State *	Zip *	Ext.	County

Clear Address Fields

Click on your address if it appears in the box.

440 N Broad St Philadelphia, PA 19130  
You must select an address from the list above.

< Previous

Save/Continue

## **Para agregar padres y encargados**

Aquí indicará los datos demográficos y de contacto de los padres/encargados. Se pueden incluir varios padres/encargados en la solicitud, pero cada uno debe agregarse individualmente. Primero se le pedirá que proporcione la información sobre la/el madre/padre/encargada/o, que creó la cuenta de la solicitud antes de agregar a otros padres/encargados.

1. Aparecerá una ventana para informarle que está por ingresar la información de los padres/encargados. Haga clic en **“OK”**.

Add Parent/Legal Guardian Title

Required Information

Please complete your information below. When you are finished, list any additional parents/legal guardians for the student.

Ok

2. Ingrese la información apropiada para cada uno de los padres/encargados. Haga clic en **“Next”**, [Continuar].

**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 >**

**NOTE:** Si se indica una/un madre/padre/encargada/o que no vive en la dirección indicada, marque "No". Luego tendrá la oportunidad de agregar una dirección para esta/e madre/padre/encargada/o, que se designará como grupo familiar secundario.

3. Ingrese la información de la/del madre/padre/encargada/o. Indique sus *Preferencias de Contacto* marcando las casillas correspondientes a la derecha de la pantalla. Lea la descripción de cada preferencia. **NO marque la casilla situada debajo de la casilla "Private"**. Tenga en cuenta que es necesario incluir al menos un número de teléfono en esta pantalla. Marque las casillas de *Texto*

(SMS) si desea recibir mensajes de texto. Ingrese el idioma de contacto que prefiera la/el madre/padre/encargada/o. Haga clic en **“Save/Continue”** [Guardar/Continuar].

**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:**

**Secondary Email:**

**Preferred Contact Language: \***

**<b><u>Contact Preferences</u></b>**

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

**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. **<b> WARNING:</b>** Checking this box will prevent you from receiving any notifications at this contact, including emergency notifications.

< Previous

Cancel **Save/Continue**

- Si se ha completado toda la información requerida, aparecerá una marca verde en la columna **“Complete”** junto al nombre de la/del madre/padre/encargada/o. Si la fila aparece resaltada en amarillo, significa que falta alguna información necesaria. Haga clic en el nombre para editar. Para agregar a otra/o madre/padre/encargada/o al sistema, haga clic en **Agregar madre/padre/encargada/o nueva/o** y repita los pasos anteriores. Cuando todos los padres/encargados incluidos en la solicitud tengan una marca de verificación verde, haga clic en **“Save/Continue”** [Guardar/Continuar].

FIRST NAME	LAST NAME	GENDER	COMPLETED
Sample	Parent	M	COMPLETED

Add New Parent/Legal Guardian

< Back **Save/Continue**

## **Para agregar contactos de emergencia**

Un contacto de emergencia es una persona a quien se debe contactar en caso de emergencia si no se puede localizar a los padres/encargados. **Cuando complete esta sección, no es necesario que vuelva a ingresar los padres o encargados que se incluyeron en las pantallas anteriores.** Estos contactos son secundarios a los padres/encargados en términos de prioridad de contacto en caso de emergencia. Debe identificarse al menos un contacto de emergencia, y las solicitudes pueden incluir hasta cuatro contactos de emergencia.

1. Se cargará la pantalla **“Emergency Contact”** [Contacto de emergencia]. Haga clic en **“Add New Emergency Contact”** [Agregar nuevo contacto]. Una ventana le informará que está por ingresar la información de los Contactos de Emergencia. Haga clic en **“OK”**.

2. Ingrese la información demográfica para el contacto de emergencia de su estudiante. Haga clic en **“Next”** [Continuar].

3. Ingrese la información de contacto de la persona. Se requiere al menos un número de teléfono. Haga clic en **“Save/Continue”** [Guardar/Continuar].

1. Se actualizará la pantalla **“Emergency Contact”** [*Contacto de emergencia*].
  - a. Si se ha incluido toda la información requerida, aparecerá una marca de verificación verde en la columna **“Completed”** junto al nombre del contacto de emergencia.
  - b. Haga clic en el nombre para editar el contacto.
  - c. Para agregar otro contacto de emergencia, haga clic en *Agregar nuevo contacto de emergencia* y repita los pasos anteriores. Cuando todos los contactos de emergencia incluidos en su solicitud aparezcan con una marca de verificación verde, haga clic en **“Save/Continue”** [*Guardar/Continuar*].

FIRST NAME	LAST NAME	GENDER	COMPLETED
Sample	Contact	F	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

The maximum number of emergency contacts is 4

## **Para agregar la información de la/del estudiante**

En esta sección, ingresará información importante sobre la/el estudiante que está matriculando. **Recuerde que solo se puede incluir un/a estudiante por solicitud.** Se debe enviar aplicaciones separadas para cada niña/o en edad escolar que se desea matricular. Aplicaciones para más de un estudiante serán rechazadas y deben reenviarse correctamente. Al completar esta sección se le pedirá que adjunte la documentación de su estudiante necesaria para completar el proceso de matrícula. Para más información sobre los documentos necesarios para la matrícula, visite la página web de la Oficina de Matrícula y Asignación Estudiantil (<https://www.philasd.org/studentplacement/registration/>).

1. Haga clic en **“Add New Student”** [Agregar nueva/o estudiante] para continuar.

**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. Aparecerá la sección Datos demográficos, que contiene información normativa importante en relación con el nombre y la identidad de género. Revise detenidamente esta información.

**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](#).

- Ingrese toda la información demográfica que se pide de la/del estudiante en los campos a continuación, así como cualquier otra información que pueda ser relevante para la/el estudiante. Según la dirección que haya facilitado anteriormente y el año escolar que haya indicado en esta sección, el sistema le indicará en esta pantalla la escuela del barrio a la cual se presentará su solicitud. Haga clic en **“Next”**, [Continuar].

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 >

**TENGA EN CUENTA:** Si no aparece ninguna escuela asignada, continúe con la aplicación. La Oficina de Matrícula y Asignación Estudiantil la/lo contactará sobre la asignación de escuela para su estudiante.

- Ingrese la información de Raza/Grupo Étnico de su estudiante. Seleccione **“Yes”** [Si] o **“No”** en el menú desplegable para indicar si la/el estudiante es o no hispana/o/latina/o. Luego marque todas y cada una de las casillas que correspondan. Haga clic en **“Next”**, [Continuar].

**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 >

**TENGA EN CUENTA:** Si ha seleccionado **“No”** en el menú desplegable Hispano/Latino, deberá marcar al menos una opción de la lista.

- Indique su situación de vivienda haciendo clic en la casilla correspondiente. Haga clic en “**Next**”, [Continuar].

**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** >

- Identifique el parentesco que cada madre/padre/encargada/o tiene con la/el estudiante seleccionando la opción apropiada del menú desplegable “**Relationship**” [Parentesco].

**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 *	GU
SAMPLE PARENT	<input type="text" value=""/>	

Description of Contact Preferences

**Guardian** : Checking this box will flag this person as the primary guardian.

**Mailing** : Checking this box means you want to receive mail from the school via this person.

**Portal** : Checking this box will allow you to receive information from the school via the parent portal.

**Messenger** : Checking this box means you want to receive information from the school via messenger.

**Secondary Household** : Checking this box means you are a secondary household member.

**Emergency Contact Order** : Setting this number indicates the order of 1.

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

< Previous   Next >

- Las preferencias de contacto se indican mediante las casillas “Guardian” [Encargada/o], “Mailing” [Correo], “Portal” y “Messenger”. Todas ellas están marcadas de forma predeterminada. Asigne un número en el menú desplegable “Emergency Contact Order” [Orden de contacto de emergencia] para indicar el orden en que el personal de la escuela se comunicará con las personas en caso de emergencia. Haga clic en “Next”, [Continuar].

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

- Indique el parentesco que tiene cada contacto de emergencia con la/el estudiante, seleccionando la opción adecuada en el menú desplegable *Parentesco* y, a continuación, seleccione el orden de prioridad en el menú desplegable *Orden de contactos de emergencia*. Haga clic en “Next”, [Continuar].

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. Indique el historial educacional de su estudiante seleccionando *Sí* o *No* en todos los campos desplegables de esta sección y, a continuación, haga clic en **“Next”**, [Continuar]

**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. Indique el historial de servicios estudiantiles de su estudiante seleccionando *Sí* o *No* en todos los campos desplegables de esta sección y, a continuación, haga clic en **“Next”**, [Continuar].

**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. Responda las preguntas sobre la información médica de su estudiante. Complete todos los campos que se piden. Continúe desplazándose hacia abajo para asegurarse de que haya completado todas las secciones.

**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. Indique si su estudiante toma medicamentos o no. Si selecciona "No" en el menú desplegable, continúe con la siguiente pregunta. Si selecciona "Sí" en el menú desplegable, aparecerán campos donde puede ingresar todos los medicamentos que toma su estudiante.

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

**TENGA EN CUENTA:** Solo podrá ingresar tres medicamentos. Si su estudiante necesita medicamentos adicionales, comuníquese con la/el enfermera/o de la escuela después de que su estudiante haya sido matriculado para brindarle información sobre los medicamentos adicionales.

13. Revise las declaraciones a continuación. La primera declaración es sobre la autorización para administrar medicamentos de emergencia, incluyendo Albuterol y EpiPens.

<p><b>Your signature gives permission for:</b></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><b>Emergency Treatment Authorization Signature: *</b></p> <p>Sample Parent</p>
--

14. La tercera parte es sobre un permiso para bloqueador solar. Escriba su nombre en las casillas para la firma de autorización. Luego haga clic en **“Next”**, [Continuar].

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. Indique qué idioma(s) habla su estudiante en cada uno de los contextos que se indican a continuación, seleccionando “Yes” [Sí] y “No” en el menú desplegable. Dependiendo de sus respuestas, puede pedírsele que identifique un idioma diferente usando el menú desplegable. Haga clic en **“Next”**, [Continuar].

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. Indique si su estudiante tiene hermanos en edad escolar que viven con ella/él en el grupo familiar principal, seleccionando “Yes” [Sí] o “No” en el menú desplegable. Si selecciona “Yes”, ingrese la información sobre esos estudiantes. Puede identificar hasta 6 hermanos en una aplicación. Haga clic en “Next”, [Continuar].

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. La sección de “Parental Registration Statement” [Declaración de matrícula de los padres] tiene preguntas sobre la historia disciplinaria de su estudiante. Las respuestas a estas preguntas son obligatorias. Después, ingrese su nombre para jurar o declarar que la información que proporcionó es correcta a su leal saber y entender. Haga clic en “Next”, [Continuar].

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 answers 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. Revise la declaración de autorización para difundir información de directorio, luego indique si desea que el Distrito comparta la información de su estudiante seleccionando “Yes” [Sí] o “No” del menú desplegable. Si selecciona “Si”, aparecerán más opciones para seleccionar. Una vez que haya elegido, ingrese su nombre en la casilla “Signature Authorization” [Autorización de la firma] y haga clic en “Next”, [Continuar].

The screenshot shows a web form titled "Release of Directory Information (FERPA)". The form contains several sections: a header with a green checkmark, an introductory paragraph about FERPA, a definition of directory information, a link to the full list of categories, a statement that information will not be provided to commercial enterprises, and a section for selecting release options. A dropdown menu is set to "Yes", and a list of four checkboxes is shown, with the first one selected. Below this is a "PPRA Notice" section and a signature box containing the text "Sample Parent". At the bottom, there are "Previous" and "Next" navigation buttons, with "Next" highlighted by a red box. Red annotations include a box around the "Yes" dropdown, a box around the first checkbox, a box around the signature text, and a box around the "Next" button. A red arrow points from the "Yes" dropdown to the first checkbox.

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 yes, please select the items to 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. El siguiente paso es adjuntar documentación para validar la fecha de nacimiento de su estudiante, comprobar su domicilio y demostrar que las vacunas están al día de acuerdo con las normas del Distrito para el grupo de edad de su estudiante. Revise las instrucciones detalladas que aparecen en esta parte de la solicitud.

**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:

**TENGA EN CUENTA:** Hay un recuadro para comentarios que los padres pueden compartir con el personal de la escuela. Esto es importante cuando un/a menor carece de hogar o está en hogar de acogida, y en otras circunstancias extraordinarias

20. Haga clic en el botón apropiado para cargar los documentos. Luego haga clic en **“Save/Continue”** [Guardar/Continuar].

- [Haga clic aquí para un video sobre cómo cargar usando iPhone](#)
- [Haga clic aquí para un video sobre cómo cargar usando un teléfono Android](#)

The screenshot shows a web form for document uploads. It contains several upload buttons, each with a 'Drop files here to select' prompt. The fields are:

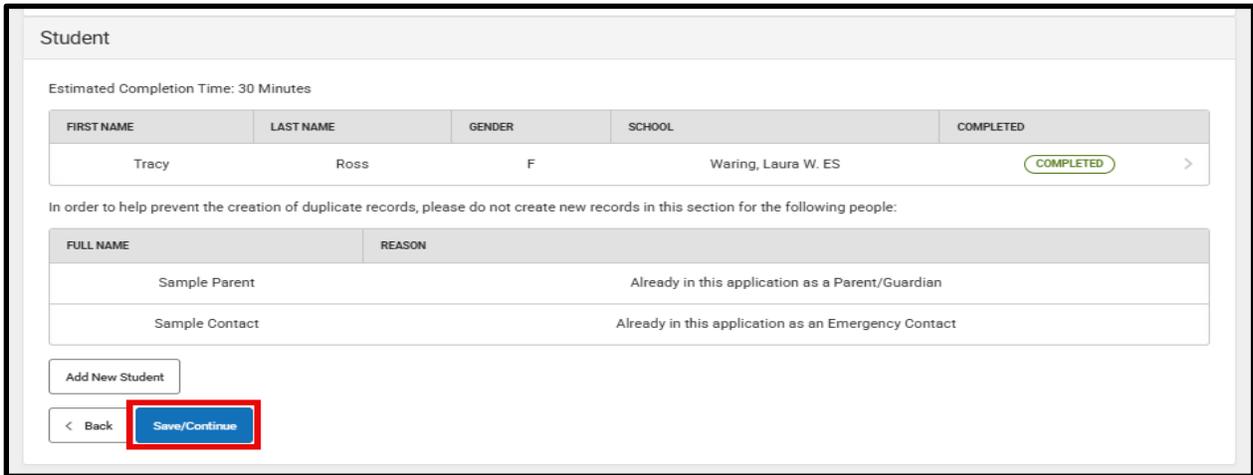
- Upload First Proof of Residency Document
- Upload Second Proof of Residency Document
- Upload Proof of Your Student's Age
- Upload Student Immunization Records
- Upload Transcript or Report Card (Optional)
- Upload Photo ID of Parent/Guardian (Optional)
- Upload Student Special Ed / IEP Documentation (Optional)
- Upload Second Immunization Records Document (Optional)

Below the upload fields is a '< Previous' button. At the bottom, there are two buttons: 'Cancel' and 'Save/Continue'. The 'Save/Continue' button is highlighted with a red rectangle.

**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.

21. Una vez que está ingresada toda la información, una marca verde, “Completed”, indicará que la sección está completa, y puede hacer clic en **Save/Continue** [Guardar/Continuar].



FIRST NAME	LAST NAME	GENDER	SCHOOL	COMPLETED
Tracy	Ross	F	Waring, Laura W. ES	COMPLETED

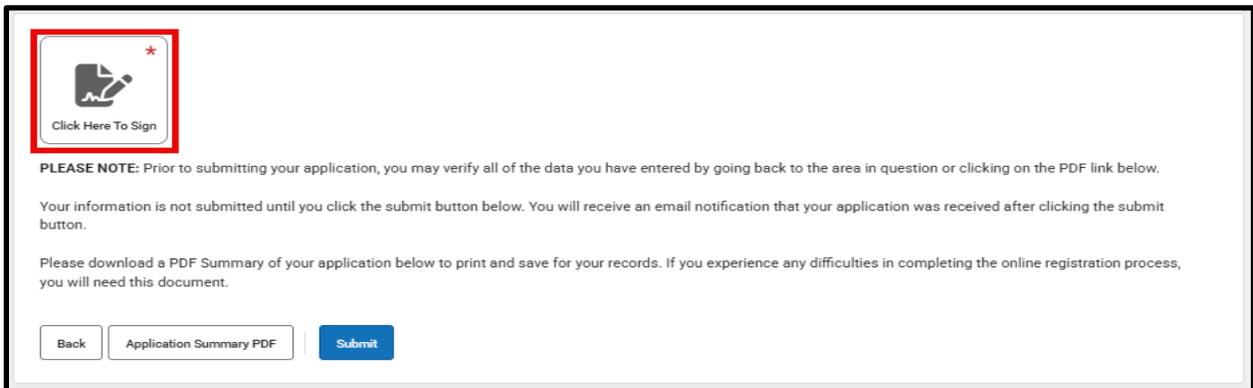
In order to help prevent the creation of duplicate records, please do not create new records in this section for the following people:

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

Buttons: Add New Student, < Back, Save/Continue

**TENGA EN CUENTA:** No está permitido inscribir a más de un estudiante por solicitud. NO haga clic en el botón “**Add New Student**” [Agregar nuevo/a estudiante]. Se rechazarán las solicitudes con más de un estudiante.

22. Haga clic aquí para firmar.



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.

Buttons: Back, Application Summary PDF, Submit

23. Para poner una firma digital, haga clic en “**Sign**” [Firmar].



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

Buttons: Sign, Decline

24. Su aplicación no estará enviada hasta que no haga clic en el botón rojo "**Submit**" [Enviar]. Revise el texto antes de hacer clic en "**Submit**" [Enviar].

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. Una vez presentada su solicitud, podrá verla en formato PDF, y podrá guardarla en su disco duro o impresa.

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

[Application Summary PDF](#)

## **Cómo acceder nuevamente a una solicitud**

Si está completando una solicitud y debe detenerse, puede volver a ella más tarde y retomarla en el punto en que la dejó. Luego podrá completar y enviar la solicitud. Una vez que haya enviado su solicitud, el personal de la escuela la revisará cuidadosamente para garantizar que esté completa y correcta. Si alguna parte de su solicitud está incompleta, se le notificará por email. Como parte del proceso, el estado de la solicitud presentada pasará a estar "no presentada". **Una solicitud no presentada aún conservará toda la información que usted ingresó originalmente. No tendrá que iniciar el proceso a partir de una solicitud "en blanco".**

Cuando se denomina no presentada una solicitud, usted recibirá un email de la escuela informando que hay alguno de los siguientes problemas:

- Sus documentos de residencia adjuntados no son admisibles
- El comprobante de edad que ha adjuntado no es admisible.
- Su estudiante no cumplirá cinco años el 1º de septiembre o antes para el curso escolar indicado en su solicitud (solo kindergarten)
- Las vacunas de su estudiante están incompletas

Tendrá la oportunidad de volver a presentar la solicitud adjuntando los documentos adecuados. Si tiene alguna pregunta, comuníquese con la *Oficina de Matrícula y Asignación Estudiantil* en [osep@philasd.org](mailto:osep@philasd.org).

1. Para volver a su solicitud, acceda a la herramienta de inscripción en línea visitando la página web de la Oficina de Matrícula y Asignación Estudiantil ([philasd.org/studentplacement](http://philasd.org/studentplacement)). Haga clic en el botón azul "New Student Registration" [Matrícula para Estudiantes Nuevos].

OFFICE OF  
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. La página de *Matrícula para Estudiantes Nuevos* incluye varios recursos para los padres y encargados que se están preparando para matricular a su estudiante en el próximo año escolar, incluyendo descripciones de los documentos obligatorios y una guía sobre cómo matricular a su estudiante en línea. Revise estos recursos. Para empezar el proceso de la Matrícula En Línea de su estudiante, haga clic en el enlace verde que dice “*Online Registration (OLR)*” [ *Matrícula en Línea*].

**About** →

**New Student Registration** →

**Kindergarten Registration** →

**School Selection** →

**Renaissance Charter Schools** →

**Resources & FAQs** →

**Contact Us** →

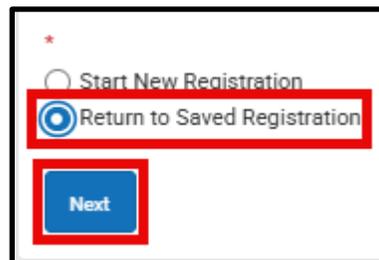
### New Student Registration

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).

3. Aparecerá la ventana que dice “*Online Registration Welcome Screen*” de bienvenida a la Matrícula en línea. Haga clic en el botón frente a la frase “*Return to Saved Registration*” [ *Volver a la matrícula guardada*]. Luego, haga clic en “*Next*”, [ *Continuar*].



4. Para acceder a su matrícula guardada, ingrese la siguiente información de la persona que originalmente presentó la solicitud exactamente como se ingresó originalmente:
- Nombre y apellido
  - Fecha de nacimiento
  - Email
  - Pregunta sobre hermanos (Yes/No)
  - Número de aplicación

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

**TENGA EN CUENTA:** Si alguno de los datos anteriores no se ingresa exactamente como estaba originalmente, aparecerá un mensaje de error en la parte inferior de la pantalla. Revise detenidamente cada campo para asegurarse de que esté todo correcto.

2fpmb

This field is required

Begin Registration

5. Complete el *Captcha* y haga clic en **“Begin Registration”** [Comenzar matrícula]. Revise su solicitud, asegurándose de ingresar información precisa y adjuntar documentos que sean

claros y legibles, en los lugares correctos. Vuelva a enviar la solicitud cuando haya incluido toda la información/documentos requeridos.

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.

**Begin Registration**