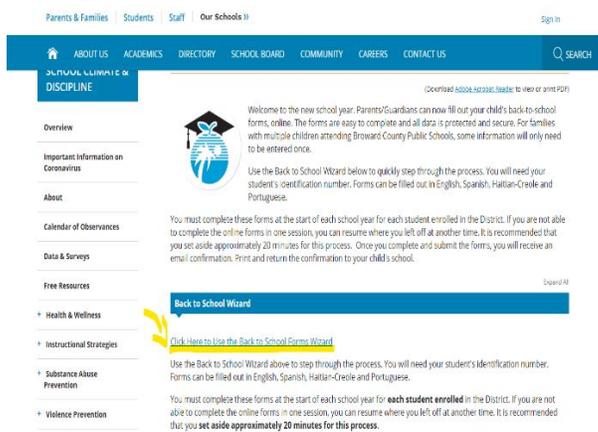


Online Back to School Forms Step by Step Slides:

Please note filling Back to School Online Forms is a twostep process

STEP 1:

- Log in using Link [ENTER LINK HERE](#)
- Broward County Public School Browser will open
- Click on Back to School Forms Wizard



Follow Instructions for Back to School Forms

- Select Language
- Click Continue



Registering Parent Information will open –

NOTE: on the Second step of the filling process you will be able to enter the second parent information.

- Complete REGISTERING Parent Information
- Click Continue

 Broward County Public Schools
Back To School 2020-21

 **Registering Parent's Information**

First Name:* Middle Name:
Last Name:*
Email:* Confirm Email:*
House Number:* Street Direction:
Street Name:*
Street Type: Apartment:
City: City If Not in Broward:
State: Zip:*
Home Phone:
Cell Phone:
Work Phone:
Primary Language:

*Denotes mandatory fields (except for phone numbers where at least one phone number must be provided)

- Student Information Browser will open
Please have your student information handy
- Fill out form
- Click Continue

 Broward County Public Schools
Back To School 2020-21

 **Student Information**

Student Number:*
First Name:*
Last Name:*
Date of Birth:*
Last or Current School:*

If you have more than one student in this or any BCP School

Pick I want to add another child option and repeat the step as needed.

- Click I want to add another Child
- Click Add Child pink tab on bottom right hand corner



Almost done!

If you have another child in the BCPS school system, then you can choose to add another child.

If you do not have another child in the BCPS school system, then you can choose to complete the process.

- I want to add another child
- I have completed the process



- Enter Second Student Information
- Fill out form
- Click Continue



Student Information

Student Number: *

First Name: *

Last Name: *

Date of Birth: *

Last or Current School: *



If you do not have any more students to add

- Click I have completed the process

Broward County Public Schools
Back To School 2020-21

Almost done!
If you have another child in the BCPS school system, then you can choose to add another child.
If you do not have another child in the BCPS school system, then you can choose to complete the process.

I want to add another child
 I have completed the process



Back 70% Finish

- Then Click Finish button on the bottom left hand corner.

Once completed with the first part of the process the following message will be generated.

Registering Parent will receive an email with the link confirmation to complete Part 2 ~ of the Back To School Forms



Thank you for using the Back to School Forms Wizard

You will receive an email notification with further instruction

If you don't receive a confirmation email shortly, please check your SPAM folder.

Many thanks for your interest in Broward County Public Schools and we hope you will find the new BCPS beneficial in gaining additional information on your child or children.



100%

PART 2 ~ Back to School Forms

PART 2

- Once you receive the email
- Click on the provided link

Back to School Forms Wizard  Inbox x



bcpsmobile@browardschools.com

to me ▾

Dear 

Thank you for starting the Back to School Forms Wizard!

Please click the following link to return to the Wizard to provide the remaining back to school information.

- <http://scaweb.browardschools.com/BTS/default.htm?registration=7992fc89-04f5-4363-b459-eb3c7bf86e6c>

Sincerely,

Broward County Public Schools

 Reply

 Forward



Broward County Public Schools

Back To School 2020-21



Okay, now you are ready to enter your child's information

Before you begin, it would be helpful to have the following information close at hand:

A list of any medications your child may take

Names and phone numbers of your child's health care providers

A list of any health insurance providers

A description of any medical conditions and/or allergies your child may have

Back



Continue

- Fill out any additional information for your student as required by wizard
- Click Continue

NOTE: You will need to repeat this step for each additional student you entered



Student Information

Student Number:*

First Name:*

Last Name:*

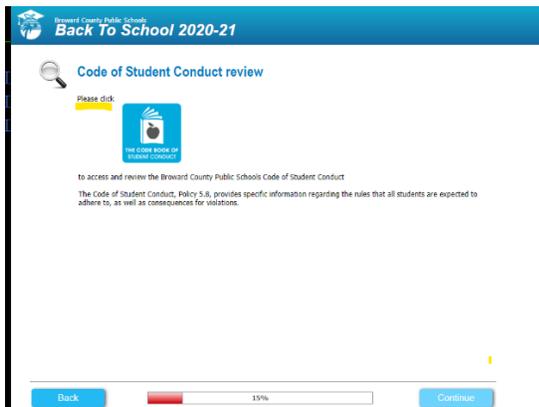
Date of Birth:*

Last or Current School:*

Back 50%

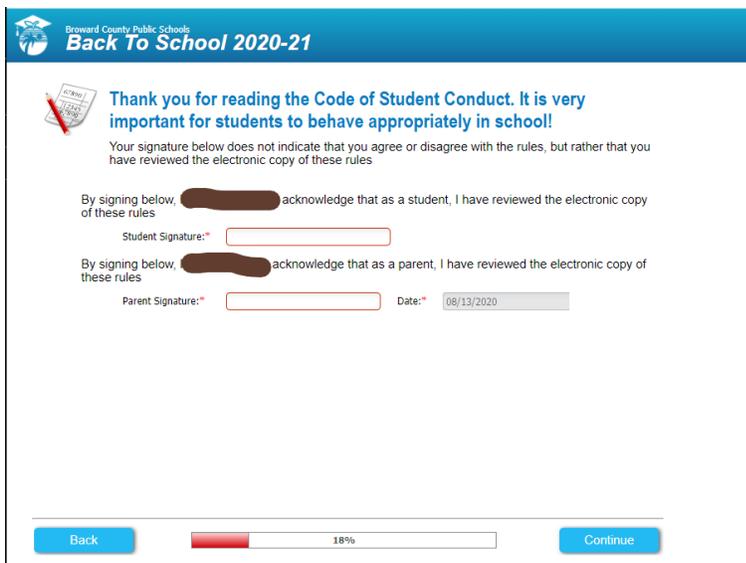
Next Code of Conduct Panel will open

- The **'Please click'** button will take you to the Broward County Public School Code of Conduct Book for you to review.
- Return to Code of Conduct Panel
- Click Continue



Acknowledge Code of Conduct Page will open

- Please enter the name of your student and date
- Please enter the name of parent filling out form and date
- Click Continue



Next Fill out 'Other Parent' Information

- Fill out form
- Click Continue

Other Parent's Information

First Name: Middle Name:

Last Name:

Email: Confirm Email:

House Number: Street Direction:

Street Name:

Street Type: Apartment:

City: City If Not in Broward:

State: Zip:

Home Phone:

Cell Phone:

Work Phone:

Back 25% Continue

Registering Parent and Authorized Release Contact

Please ensure First Name, Last name, Relationship and phone numbers are completed on this page

- Fill out information (complete information)
- Parent filling out information enter your name, relationship and date
- Click Continue

Registering Parent - Authorized Release/Contact

Note - Only the Registering Parent may fill this section out.

Please list the names of persons to whom we may release your child or whom we may contact if we cannot reach you. NO STUDENT WILL BE RELEASED TO ANYONE OTHER THAN THE PERSONS LISTED BELOW. In selecting someone to whom you authorize the release of your child, consider: Is this person prepared to handle any special medical needs required by your child? I/We hereby authorize contact with, release of emergency related information, or release of the student to the following persons in the event of illness, evacuation, or other emergency that may occur while the student is in school.

First Name	Last Name	Relationship	Home Phone	Cell Phone
<input type="text"/>				
<input type="text"/>				
<input type="text"/>				
<input type="text"/>				

I declare that the information on this card is true and correct. I will notify the school office immediately of any changes.

Signature: Date: Relationship:

Back 28% Continue

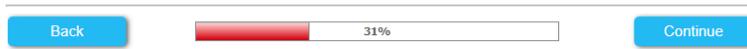
Health Information Panels

- Click Continue



Excellent! Now we can take care of some required health information

This information is kept confidential and is used by the school only in cases of emergency.



Note other slides will appear for parents to fill out should they choose too (vision, hearing, library card etc.) said slides will appear as parents are completing the form wizard. *The Slides mentioned are not pictured on this presentation*

FERPA

- Please **read instructions carefully before checking off your choices**
- Parent filling form enter name and date
- Click Continue

Broward County Public Schools
Back To School 2020-21

 **Please enter FERPA restrictions for** [REDACTED]

ATTENTION! Checking items below will prevent the selected information from appearing in school publications, including, but not limited to, the yearbook, even if you provide permission in Section B on the Media Release Form. For Example: Checking "Student's Name" below may prevent the student's photograph from appearing in the yearbook.

"Directory Information" is personally identifiable information that would not generally be considered harmful or an invasion of privacy if disclosed. Pursuant to the Family Educational Rights and Privacy Act (FERPA), The School Board of Broward County, Florida may disclose in its discretion directory information of a student in any grade level, without prior consent only (a) to colleges, universities or other institutes of higher education in which the student is enrolled, may seek enrollment or may be recruited; (b) for school publications, instructional materials and other school communication tools (including, but not limited to, yearbooks, athletic programs, graduation programs, recruitment brochures, theatrical programs, school and District websites, and postings and displays throughout the school facility); (c) to Broward County health officials for purposes of communicating with parents to address conditions of public health importance as determined by Florida Department of Health (34D-3, F.A.C.), including information to meet or to prepare for a potential or confirmed health threat; and/or (d) to class reunion committees (and the like) for purposes of class reunion activities.

Parents/guardians of students in any grade level, or eligible students (those over the age of 18, emancipated, or attending a postsecondary institution), may opt out of having any or all of the following types of directory information disclosed by indicating, with a check mark (✓), those items NOT TO BE DISCLOSED:

Student Name:	<input type="checkbox"/>	School-Sponsored Activities and Sports:	<input type="checkbox"/>
Parent's Name:	<input type="checkbox"/>	Height and Weight of Athletic Team Members:	<input type="checkbox"/>
Residential Address:	<input type="checkbox"/>	Jersey Number and Team Position:	<input type="checkbox"/>
Telephone Number(s):	<input type="checkbox"/>	School Grade Level:	<input type="checkbox"/>
Date of Birth:	<input type="checkbox"/>	Dates of School Attendance:	<input type="checkbox"/>
Place of Birth:	<input type="checkbox"/>	Degrees & Awards:	<input type="checkbox"/>
Major Field of Study:	<input type="checkbox"/>	Name of the Most Recent/Previous School or Program Attended:	<input type="checkbox"/>
		Room Number:	<input type="checkbox"/>

*Degrees and Awards include exemplary work (including artwork), recognitions of all types, and graduation status (i.e., a list of graduating students), and exclude Grade Point Average (GPA).

Parent Signature:* Date:*

76%

Once completed the slide below will appear

Broward County Public Schools
Back To School 2020-21

Thank you for using the Back to School Forms Wizard

The provided information will help us to improve the quality of our service!

Your confirmation ID is: [REDACTED]. Please keep it for future references.

Please print and sign the Back to School submission sheet and return it to your child's school within 10 days of the start of school.

Your opinion is very important to us and by completing the [surveys](#) we will have information to allocate resources to improve the lives of you and your family.

Thank you

Submission Forms to Print

- [REDACTED]
- [REDACTED]

Please Print the following Required Forms

- OTC Medicate Auth Form (Grades 9-12)
- OTC Medicate Auth Form (All Grades)
- Medical Authorization Form



100%

When you click on your students' names (blacked out on this slide for privacy purposes) on the panel shown above parents will be able to generate and print out the forms they completed and keep for their records.

PLEASE NOTE:

- School only needs The Back to School Online Form
- All forms school will be able to access and print in Basis as needed
- **Parents SCAN BACK via email to 1st Period Teacher (The Back to School Online Forms Submission Sheet signed and dated)**
- First Period Teacher emails forms to Cristina.Yanes@browardschools.com

**PLEASE PARENTS NEED ONLY SEND BACK The FOLLOWING PAGE -
Back to School Online Forms Submission Sheet.**

Broward County Public Schools

Back-to-School Online Forms Submission Sheet

Rather than completing and returning the hard copy Back-to-School packet and Code of Student Conduct Signature forms, I have used the Back-to-School Forms Wizard to complete the forms online. Please use the information I have submitted online to update my child's record. I have included the confirmation number I received at the end of the process for verification purposes.

Student's Name: STUDENT NAME Grade: 08
School: TEQUESTA TRACE MIDDLE
Confirmation ID: 489222234 Date: 8/13/20
Parent's Name: PARENT NAME
Parent Signature: Parent Signature

Attention Teachers/School Staff:

Please forward this form and any associated documents to your School's IMS/IMT for processing.

