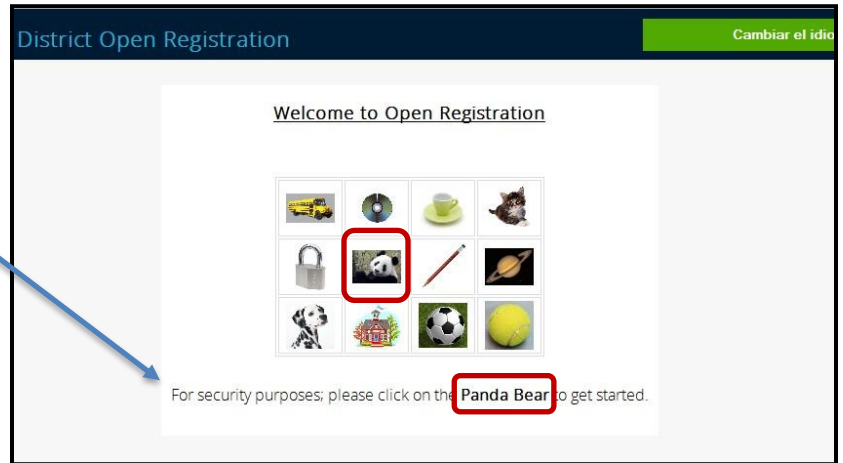

Open Registration

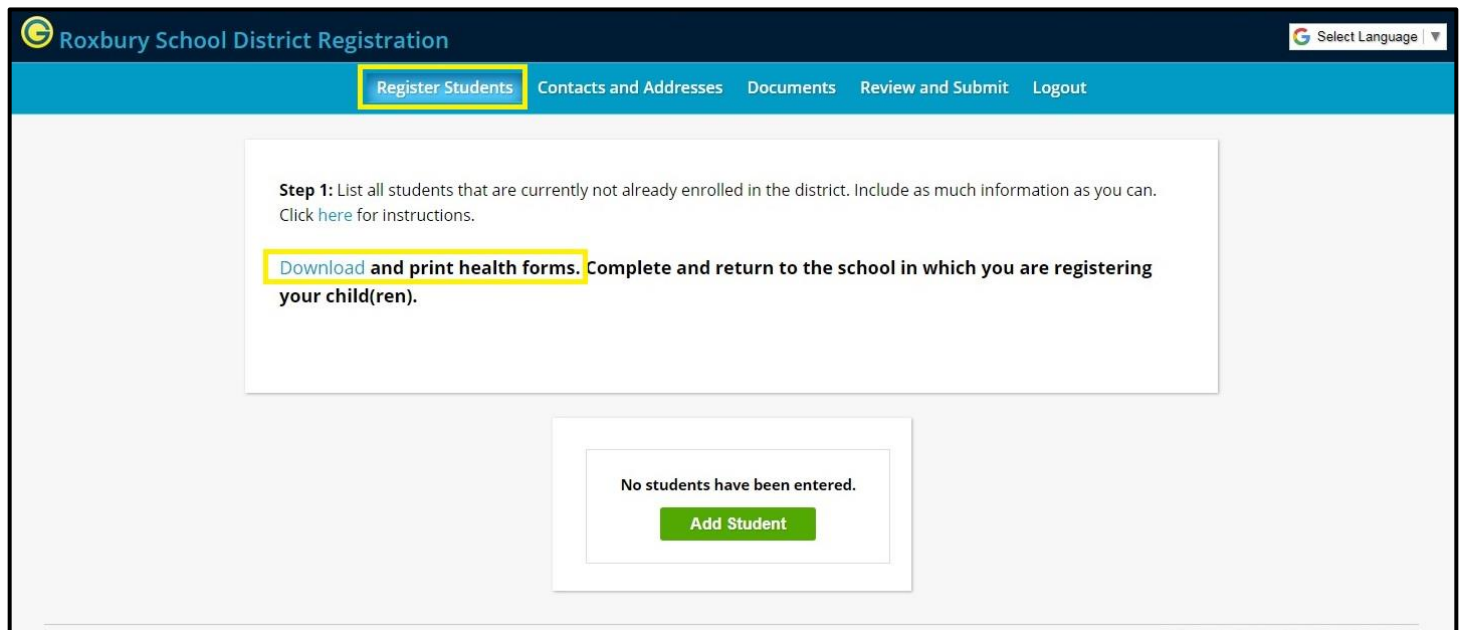
Click here to access the [Roxbury School District Registration](#) website.

At the welcome screen, read the security message and click on the specific photo.

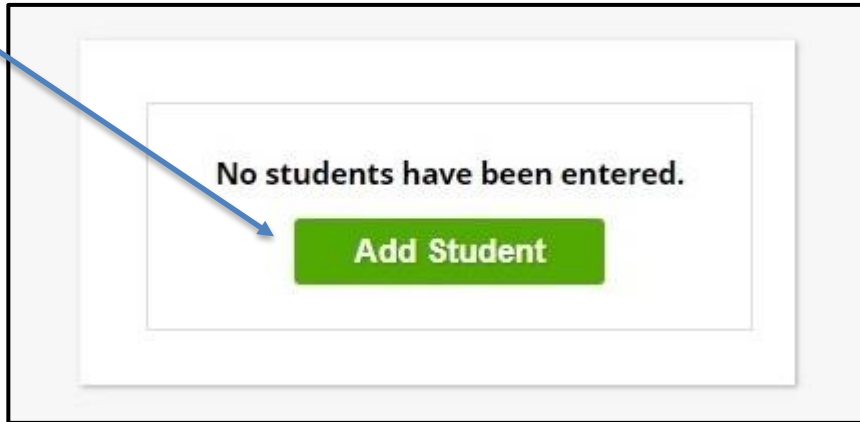


Register Students tab

1. Download and complete the required health forms for each student that you are registering



2. Click "Add Student"



3. Fill in the student information

(An ***(asterisk)** denotes required fields that must be completed In order to submit the registration)

FILL OUT THIS FORM AND THEN HIT THE 'SAVE STUDENT' BUTTON	
* DENOTES REQUIRED FIELDS	
Registering for School Year:*	<input type="text"/>
Anticipated Grade Level:*	<input type="text"/>
Select the school the student will be attending:	<input type="text"/>
Student First Name:*	<input type="text"/>
Student Last Name:*	<input type="text"/>
Suffix:	<input type="text"/>
Ethnicity:	<input type="checkbox"/> Hispanic
Select one or more:*	<input type="checkbox"/> White
	<input type="checkbox"/> Black
	<input type="checkbox"/> American Indian / Alaskan
	<input type="checkbox"/> Asian
	<input type="checkbox"/> Hawaiian native/other Pacific Islander
Gender:*	<input type="text"/>
Date of Birth:*	<input type="text"/>
Refuse release of birthplace information:	<input type="checkbox"/>
City of Birth:*	<input type="text"/>
State of Birth:*	<input type="text"/>
Country of Birth:*	<input type="text"/>
Date First Enrolled in US School (if born outside the US):	<input type="text"/>
Date of First Entry to US	<input type="text"/>
Primary Language spoken by student:*	<input type="text"/>
Language spoken by family at home:*	<input type="text"/>
Military Connected Indicator:*	<input type="radio"/> Not Military Connected - Student is not military-connected
	<input type="radio"/> Active Duty - dependent of a member of the Active Duty Forces (Full Time: Army Navy Air Force Marine Corps or Coast Guard)
Insurance Provider:	<input type="text"/>
Has Med Insurance?:*	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Unknown
Release to NJ Family Care:	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Unknown

4. Provide the Native Language

What language did your child speak first? (Native Language: The language first acquired by the child, or the language most often spoken in the child's home, regardless of the language the child speaks now.)	<input type="text"/>
--	----------------------

5. Access the AUP and the Media Consent agreements by clicking on the blue words

Use the drop down list for each to grant permission

I have read the AUP agreement and grant my child permission.	<input type="text"/>
I have read the Media Consent agreement and grant my child permission.	<input type="text"/>

6. If you need transportation for babysitting and/or daycare, enter "Y" and download the form

Bring the completed form to your scheduled Central Registration appointment.

Do you need babysitting/day care transportation? Y or N.	Download form.	<input type="text"/>
--	-----------------------	----------------------

7. Once all information has been entered, click the "Save Student" button

8. Click “Modify Student” if you need to edit or change information for that student

STUDENTS WHO YOU HAVE ENTERED							
STATUS		LAST	FIRST	MIDDLE	DOB	AGE	
Completed	1.	Student	Test		1/3/2000	18	 

Click “Remove Student” if you need to cancel the student registration

9. If registering additional students, click “Add Another Student” and repeat Steps 3-7

Add Another Student

10. Once you have completed Register Students, click the “Advance to Next Screen” button

Advance to Next Screen

Contacts and Addresses tab

1. A Legal Residence is required for the student and Primary Parent/Guardian
Click "Add Primary Address and Primary Parent/Guardian" to proceed

Register Students **Contacts and Addresses** Review and Submit Logout

Step 2: A **Legal Residence** must be entered for the student and Guardian 1. PO Box is not acceptable for a Legal Residence address.

PRIMARY ADDRESS AND PRIMARY PARENT/GUARDIAN
Add Primary Address and Primary Parent/Guardian

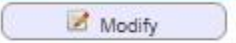
2. Enter the Primary Parent/Guardian information
Once completed click "Save Primary Contact Information" to proceed

SECTION 1: ADD THE STUDENT'S PRIMARY ADDRESS			
House # *	<input type="text" value="30"/>		
Street Name*	<input type="text" value="Village Green"/>		
Apt #	<input type="text" value="F"/>		
City*	<input type="text" value="Budd Lake"/>		
State*	<input type="text" value="NJ"/>		
Zip*	<input type="text" value="07828"/>		
County	<input type="text" value="Morris"/>		
SECTION 2: GUARDIAN AT PRIMARY ADDRESS			
First Name*	<input type="text" value="Mrs."/> <input type="text" value="Test"/>	Last Name*	<input type="text" value="Student"/>
Relationship to Student*	<input type="text" value="Aunt"/>		
Home Phone	<input type="text"/>	<input checked="" type="checkbox"/>	Primary
Cell	<input type="text"/>	<input type="checkbox"/>	Primary
Cell Provider	<input type="text" value="Unknown"/>		
Work	<input type="text"/>	<input type="checkbox"/>	Primary
Primary Email	<input type="text"/>		

Save Primary Contact Information Cancel

3. After submitting the Primary Contact information, continue to enter:
 - Additional Parents/Guardians
 - Emergency Contacts
 - Additional Other Contacts

Click the “Modify” button to edit any saved information

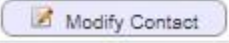
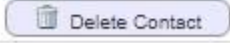
PRIMARY ADDRESS AND PRIMARY PARENT/GUARDIAN REQUIRED*					
	STREET NUMBER	STREET NAME	CITY	STATE	
Primary Address	60	Village Green	Budd Lake	NJ	
	TITLE	FIRST NAME	LAST NAME	PRIMARY PHONE	
Primary Guardian	Mrs.	Test	Student		

ENTER ADDITIONAL PARENTS/GUARDIANS

[Add Additional Parent/Guardian](#)

ENTER EMERGENCY CONTACTS

[Add Additional Emergency Contact](#)

ENTER OTHER CONTACTS AT LEAST ONE REQUIRED*					
	TITLE	FIRST NAME	LAST NAME	PRIMARY PHONE	
Contact 1	Mr.	Test	Students		 

[Add Additional Other Contact](#)

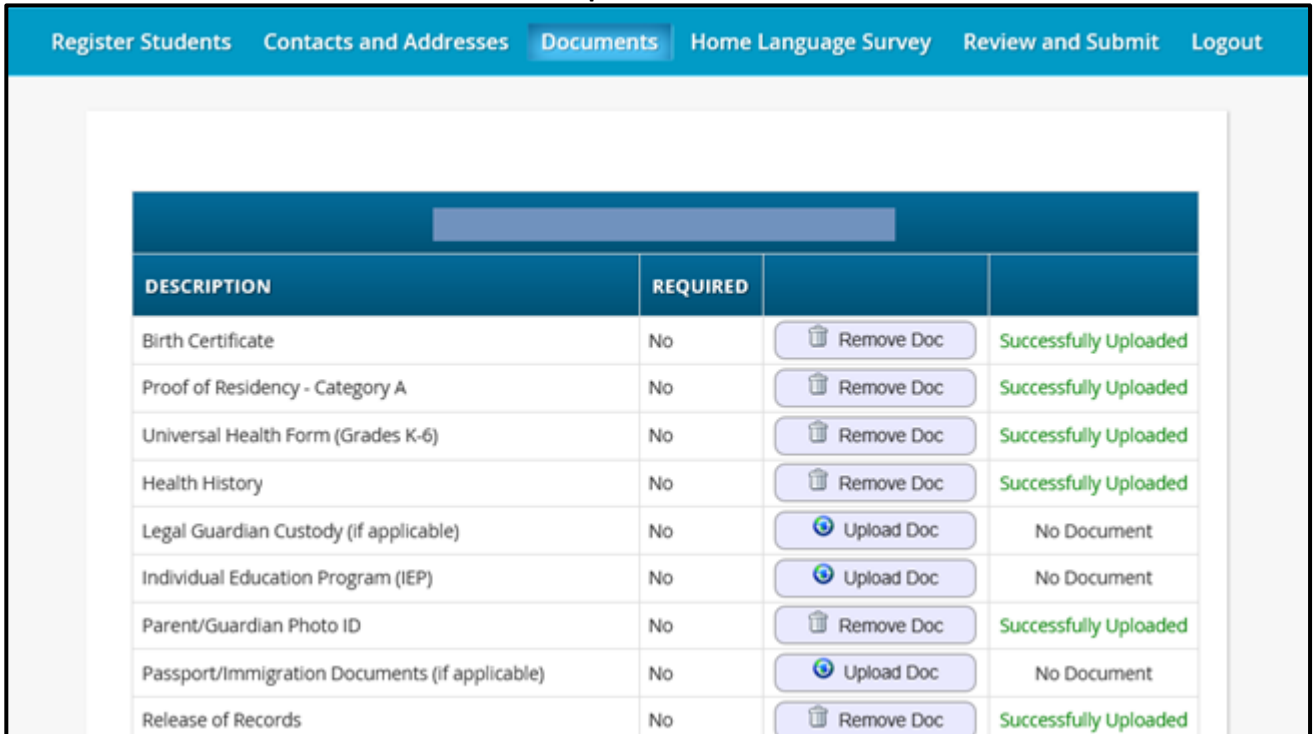
[Advance to Next Screen](#)

4. Once you have entered the Primary Parent/Guardian, Additional Parent(s)/Guardian(s), Emergency and Other contact information, click “Advance to Next Screen”

Documents tab

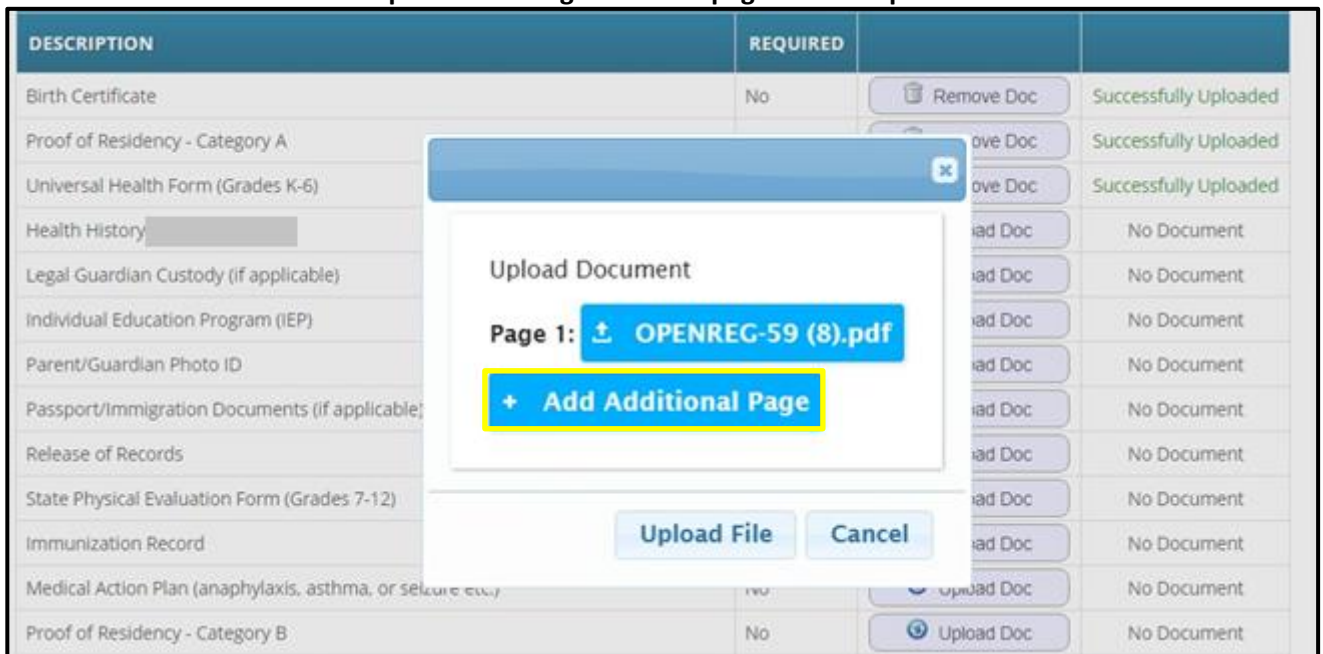
Specific documents are required for admission into the Roxbury Township School District. Please reference the online registration Parent Check List. If you are unable to upload the documents, please bring them with you to your scheduled appointment along with your registration confirmation sheet.

1. Upload Documents



DESCRIPTION	REQUIRED		
Birth Certificate	No	Remove Doc	Successfully Uploaded
Proof of Residency - Category A	No	Remove Doc	Successfully Uploaded
Universal Health Form (Grades K-6)	No	Remove Doc	Successfully Uploaded
Health History	No	Remove Doc	Successfully Uploaded
Legal Guardian Custody (if applicable)	No	Upload Doc	No Document
Individual Education Program (IEP)	No	Upload Doc	No Document
Parent/Guardian Photo ID	No	Remove Doc	Successfully Uploaded
Passport/Immigration Documents (if applicable)	No	Upload Doc	No Document
Release of Records	No	Remove Doc	Successfully Uploaded

2. Option of adding additional page to each upload



DESCRIPTION	REQUIRED		
Birth Certificate	No	Remove Doc	Successfully Uploaded
Proof of Residency - Category A	No	Remove Doc	Successfully Uploaded
Universal Health Form (Grades K-6)	No	Remove Doc	Successfully Uploaded
Health History	No	Remove Doc	No Document
Legal Guardian Custody (if applicable)	No	Remove Doc	No Document
Individual Education Program (IEP)	No	Remove Doc	No Document
Parent/Guardian Photo ID	No	Remove Doc	No Document
Passport/Immigration Documents (if applicable)	No	Remove Doc	No Document
Release of Records	No	Remove Doc	No Document
State Physical Evaluation Form (Grades 7-12)	No	Remove Doc	No Document
Immunization Record	No	Remove Doc	No Document
Medical Action Plan (anaphylaxis, asthma, or seizure etc.)	No	Remove Doc	No Document
Proof of Residency - Category B	No	Remove Doc	No Document

3. Once you have completed uploading documents, click the "Advance to Next Screen" button

Review and Submit tab

1. Review and verify all your information for accuracy.

To make corrections, simply select the "Edit" buttons, update the information as needed and then return to this screen by clicking on the "Review and Submit" tab at the top of the screen

[Register Students](#) [Contacts and Addresses](#) [Documents](#) [Review and Submit](#) [Logout](#)

Please verify that the following information is correct.

If you need to make corrections, just edit the information that you need to correct and then return to this screen by clicking on the 'Review and Submit' tab at the top of the screen.

Student Information

STUDENT NAME: TEST STUDENT				
TEST WILL BE REGISTERING FOR THE 2018-19 SCHOOL YEAR IN GRADE 06				
First Name	Last Name	Age	School	School Year
Test	Student	18	LRS	2018-19

[Edit Student Information](#)

Contact Information

1. MRS. TEST STUDENT , GUARDIAN				
Home Phone	Cell Phone	Work Phone	Email	Address
	Provider:UNKNOWN			60 Village Green Budd Lake, NJ 07828

2. MR. TEST STUDENTS				
Home Phone	Cell Phone	Work Phone	Email	Address
	Provider:UNKNOWN			60 Village Green Budd Lake, NJ 07828

[Edit Contacts](#)

Document Information

DOCUMENTS FOR: TEST STUDENT		
Description	Required	Upload
Birth Certificate	Yes	No Document
Medical Records	Yes	No Document
Proof of Residence	Yes	No Document

[Edit Documents](#)

Page 8 of 10

2. Enter your email address to receive a registration confirmation

Bring a copy of the registration confirmation form to your scheduled Central Registration appointment

If you would like an e-mail confirmation, enter your email address below.

3. Once you have completed Steps 1 & 2, click the “Submit Registration Information” button.



4. Print the confirmation form and bring it with you to your scheduled appointment.



5. If making updates you will need to resubmit the form to save any changes.

The screenshot shows a web application interface with a blue navigation bar at the top containing the following links: Register Students, Contacts and Addresses, Documents, Review and Submit, and Logout. Below the navigation bar, a white box contains a green button labeled "Resubmit Registration Information" and the text "Your changes will not be saved until you click resubmit". Below this, a larger white box displays a confirmation message: "Your changes have been submitted. Please print the PDF below for your own records. Thank you." The PDF preview shows the "Roxbury School District Open Registration" form. The form includes a barcode with the alphanumeric string *D45D5FCFG2* and a date created of 01/24/2018. The form is divided into two main sections: "Student Information" and "Contact Information".

Student Information

Student Name: *Test Student*
Test will be registering for the 2018-19 school year in Grade 06
Desired School: *Lincoln Roosevelt School*
Date of Birth: 1/3/2000
Place of Birth: *Denville NJ United States*
Primary Language of student: *English*
Language spoken at home: *English*
Do you need babysitting/day care transportation? Y or N.
-Download form.

Contact Information

Mrs. Test Student, Guardian
Email: *Address Information*
60 Village Green
Budd Lake NJ 07828

Mr. Test Students, Other
Email: *Address Information*
60 Village Green
Budd Lake NJ 07828

6. Logout

The screenshot shows the same blue navigation bar as in the previous image. The "Logout" button is highlighted with a yellow border, and a blue arrow points from the text "6. Logout" above to this button.