Back to School Forms.

To fill out back to school forms log back in to your parent portal. Once

logged in you will be presented with the Enrolled Student Dashboard.

Enrolled Student Dashboard	MY PARENT ACCOUNT William Caudill wcaudil@eschoolytew.com Last Access: 3/1/2017 at 2:36 PM
Submit & View Online Forms	Last Access. 3/1/2017 at 2.30 PM
Enroll New Student(s)	MY STUDENT ACCOUNTS
Manage My Students	John Cena • John Cena
Update My Account	Granville Elementary School Grade 02

On the right make sure you have the desired student account. Once the desired

account is selected, click on "Submit & View Online Forms."

PARENT ACCOUNT William Caudill		STUDENT ACCOUNTS My Student(s)
wcaudill@eschoolview.com		John Cena
Last Access: 3/1/2017 at 2:36 PM Update My Account		John Cen
		Granville Elementary Schoo Grade 0
		Manage My Student
Ay Online Forms Available To S	Submit	
ing online i onno Arandole i o e	donne.	
The second se		Free/Reduced Meals App
	iew the form, fill out the information requested, and subn	
For each of the forms listed below, you may revi responses to the district for approval electronic		Free/Reduced Meals App (2016-17) Current Status: SAVED
responses to the district for approval electronic		Free/Reduced Meals App (2016-17)
responses to the district for approval electronic	ally.	Free/Reduced Meals App (2016-17) Current Status: SAVED Click here for the application
responses to the district for approval electronic Rack	ally. To School Forms	Free/Reduced Meals App (2016-17) Current Status: SAVED
responses to the district for approval electronic Rack Form Name/Title	ally. To School Forms Status	Free/Reduced Meals App (2016-17) Current Status: SAVED Click here for the application
responses to the district for approval electronic Rack Form NamelTitle Student Demographics & EMA	ally. To School Forms Status New/Not Yet Started	Free/Reduced Meals App (2016-17) Current Status: SAVED Click here for the application

All of the required forms will appear in the location pictured above. Next Click on a form. Do note that you can still change which student's forms you are filling out, by selecting the top right box, under "Student Accounts."

Part Eight: Electronic Signature & Authorization		
I agree to complete and submit through electronic means the Emergency Medical Authorization and such other forms, documents and questionnaires as the school district may require."		
Digital Signature of Parent/Guardian	Date 3/9/2017	
Pursuant to R.C. 1306.01 to 1306.23 of the Ohio Revised Code, the parties have agreed to receipt and transmission of an Emergency Medical Authorization Form in an electronic format. Under Ohio law, an electronic record and signature satisfies applicable legal requirements and may not be denied full and unconditional legal effect or enforceability solely because it is in electronic form."		
Save Submit to District Go Back		

Once you complete the form, you can "Save & Submit to District." If you

have to get up and leave before you finish you can "Save." If you are just

reviewing the form you can simply go back when you are done. All forms will

vary, but these three options will remain consistent.

If you have not filled out the form completely, when you attempt to

submit the required fields will prevent submission and point out required fields.

The fields will be indicated by red text and highlighted.

Save Save & Submit to District Go Back
Your form is not ready to submit. Some things need to be looked at first. Please review the list below and fix:
Part One: You must indicate if there are problems with the student demographic data. Part Two: Please check at least one option for the 'Student Lives With' question. Part Two: Please check at least one option next to the 'Parent Relationship Status' question. Part Three: Please make a legal custody order question answer selection. Part Five: Please make a selection for the medical/health issues question. Part Six: A Selection For Consent or Denying of Emergency Treatment is required. Part Eight: A parent electronic signature is required to submit this form at the bottom. Please type your name.

Does your child have medical/health issues? Please	e Select •
	Part Six: Consent or Refusal For Emergency Medical Treatment
* Please Select:	Please Select

After completing the highlighted fields save & submit the form for District

approval.