Santa Cruz High School



ONLINE REGISTRATION

Welcome to Santa Cruz High School! STEP 1:Determine School of Attendance

• Verify your school of attendance.

https://locator.pea.powerschool.com/?studyId=23 4299

- If Santa Cruz High is not your designated school or your home address is not listed, please visit our district's website for school transfer information.
- <u>https://www.sccs.net/</u>

□ Parents/Students □ Enrollment & Registration



Determine School of Attendance

If your address falls within our attendance area, the assigned school will appear as Santa Cruz High School.

You can then proceed to STEP 2.

Top	Left side Controls:
О Тор	Right side Controls:
Brow	se assigned Schools:
Click the m	on a school below to popup info or ap
	Westlake ES (K - 5)
1	1000 High Street
	Santa Cruz, CA 95060
F	Mission Hill MS (6 - 8)
1	425 King Street
	Santa Cruz, CA 95060
	Santa Cruz High (9 - 12)
1	415 Walnut Avenue
	Santa Cruz CA 95060

👗 Elementary 💑 Middle 💑 High

Legend:

Determine School of Attendance

If the assigned school is Soquel or Harbor High school, you will need to fill out an **intradistrict** transfer form.

Needs to be approved by the District

office.



If the assigned school is out of our district, you will need to fill out an **interdistrict** transfer form. Needs to be approved by the District office.

O Top	o Right side Controls:
We a	re sorry. It appears that your
addre	ess falls outside of the district dary
To fin	id out if your children are eligible t
atten	d schools in this district please
Lege	nd:
🔓 E	lementary Middle High

Step 2: Online Registration

If you already have a student attending a school in the district of Santa Cruz City Schools please login to your parent portal to begin the registration process for the new student.If you have any questions on how to do this please contact Lisset Angulo at <u>lissetangulo@sccs.net</u> or (831) 429-3960.

Instructions Below



https://docs.google.com/document/d/10B00nPbhvZ1MdwmWSdbKFdYxDyd6VNr9AHtEPBHuESA/edit?usp=sharing

*If you do not have a student attending a school at SCCS go onto the next slide.

If you don't have a student attending the district of Santa Cruz City Schools, click on the following link to start the registration process:

Online Registration

Select the appropriate school year and click *next*



Please check your email.

The email address you entered will receive and email shortly. It will contain a link that will lead you to the official registration page.



Please note that there will be an application number provided to you that you will need to give to the school's counseling secretary.



Be prepared to provide the following information.

This information is required to complete the online application.

Household information-address and phone number

Parent information-work and cell phone numbers, email addresses

Student information-demographic and health/medication information

Emergency contacts-phone numbers

Please begin to fill out the application.

A red asterisk means that the field is required and you won't be able to continue to the next page without filling in that field.

Santa Cruz City Schools requires the following for proof of address:

- PG&E Bill
- Water/Gas Bill

Please upload this document under the *upload proof of residency* portion or drop it off at the Santa Cruz High School Counseling office.

If the documents are not in your name, contact the counseling office for more information.

Proceed to the next page.

Parent/Guardian information is required.

If the student does not live with parent, please provide guardianship forms to the Santa Cruz High Counseling office.

Enter parent/guardian contact information.

At least one phone number is required.

licates a required field		
Student(s) Primary Househol	d Parent/Guardian	SEmergency Contact
rent/Guardian Name: Pete Demographics	Pirate	
Enter the Parent/Guardian you	wish to enter. Please review and complete	the following:
First Name	Pete	
Middle Name		
Last Name	Pirate	
Suffix	~	
Birth Date	6	1 *
Gender	~ *	
Pa	esse check this box if this person lives at 300 Le Fond SANTA CRUZ	the address lated below. Alve CA \$9562
Contact Information		
Residence Change		

If all required information has been entered for the parent/guardian a **check mark** will indicate that you have completed that section and you can add a second parent or click save to continue.

If the person is **highlighted in yellow** this will indicate that required information is missing. Please click on *edit/review* to enter missing information.



Please provide 3 emergency contacts in case of an emergency, if a parent cannot be reached.



Enter your student's information.

Please make sure student's full name and date of birth match your student's birth certificate.

	ciu				
Student(s) Prima	ry Household 🔰 🗸 Pare	ent/Guardian 🖒 🗸 Ei	mergency Contact	▼ Student	Completed
udent					
irst Name	Last Name	Gender	School	Completed	
irst Name lease include all stude	Last Name	Gender	School	Completed	
First Name Please include all stude fellow - Indicates tha	Last Name	Gender rmation. Select the highlight	School ed row to continue.	Completed	

Back

A copy of your student's birth certificate is required for enrollment.

Please upload birth certificate by clicking on the upload verification of age or drop off at the Santa Cruz High Counseling office.

Student(s) Primary He	ousehold 🜔 🗸 Par	ent/Guardian	▼ Student	© Completed	
udent Name: Peter F	Pirate				
Demographics					
Please verify or add the inf	formation below, and upda	te any information that is incorrect. Please enter the s	tudent's name and gende	r exactly as it appears on	the birth certificate.
Legal First Name	Peter	* Legal Gender	Non-binary Y *		Enrollment Grade
Legal Middle Name		Birth Date	08/10/2008	Q.*	Boundary School: Unable to determin
Legal Last Name	Pirate	* Will the student be participating in a school	Ver M X	0000	boundary school.
Suffix	*	athletics program (team sports)?	165 *		
Nickname		Birth Country			•
Student Cell Number	() -	Is this a toreign exchange student?	No ¥*		
Student Personal Email		righest Education Level of Either Parent	College Graduate	•-	
 birth certificate birth record baptism certification passport affidavit of the page 	te arent, guardian, or cust	odian of the minor			
birth certificat birth record baptism certificat pasport affidavit of the p- affidavit of the p- If you prefer not to uple Upload Verific	te arent, guardian, or cust oad a document, you m ration of Age	odian of the minor ay bring your documents to the school. Click Ne	xt.		
birth certificate birth record birth record backism certificat passport passport affidavit of the p If you prefer not to uple Upload Verifice Next + Race Ethnicity	te arent, guardian, or cust oad a document, you m ration of Age	odian of the minor ay bring your documents to the school. Click Ne	xt.		
birth certifical birth record bagtsm certifical passport affdavit of the p If you prefer not to uple Upload Verific Next + Race Ethnicity Housing	te arent, guardian, er cust oad a document, you m zation of Age	odian of the minor ay bring your documents to the school. Click Ne	xt.		
bith certifical bith certifical bith record backim certifical anatoxim antioxim	te arent, guardian, or cust oad a document, you m ration of Age	odian of the minor ay bring your documents to the school. Click Ne	st.		
bith certifical bith certifical bith record bith record bith record bith record affidavit of the pith Upload Verific liest + Rece Ethnicity Housing Student Services Language Information	te arent, guardian, er cust oad a document, you m nation of Age	odian of the minor ay bring your documents to the school. Click Ne	xt.		
bith certifical bith certifical bith record backsmic entifical addisavit of the p- If you prefer not to uplin Upload Verific local # Rece Ethnicity Housing Budent Services Language Information	te arent, guardian, or cust oad a document, you m attion of Age	odian of the minor ay bring your documents to the school. Click Ne	st.		

If your student has any mental health or medical conditions, please let us know.

You must click on the blue links in order to view documents and to proceed to the next page.



Student's immunization records are required for enrollment.

Please upload immunization records by clicking on *upload immunizations* or drop off at the Santa Cruz High Counseling office.

If your student has a COVID-19 vaccination card, please upload by clicking *upload COVID-19 Card(s).*

Infinite	Application Number 4513
* Indicates a required field	
Student(s) Primary Household	Contact Student
Student Name: Peter Pirate	
> Demographics	
Race Ethnicity	
+ Housing	
Student Services	
Language Information	
+ Previous School	
Tribal Enrollment	
Relationships - Parent/Guardians	
+ Relationships - Emergency Contacts	
+ Health Services - Emergency Information	
Health Services - Insurance Information	
Health Services - Medical or Mental Health Conditions	
* Health Services - Medications and Immunizations	

No medications.

Has your student been vaccinated against COVID-19?	Yes 🗸 🐂
Nave you provided the school with your student's COVID-19 vaccination card(s)?	No Y

Please upload a scan or photo of immunization records if you are registering a new student or a student who will be entering 7th grade. If you prefer not to upload a document, you may bring your documents to the school.

Upload Immunizations

Please upload a scan or photo of the COVID-19 vaccination card(s). If you prefer not to upload a document, you may bring your documents to the school. Upload COVID-19 Card(s)

Click on the blue links to view documents.

This is for your information only.

You do not have to print and sign forms.

Your signature at the end of the application will indicate that you have read and agreed to all parts of the application.

Release Agreements The linked documents below are for your information only, and do not require individual signatures on the documents themselves. Your signature at the and of the application process will indicate that you have read and understand all parts of the application. Students, Parents, and Quardians Rights and Responsibilities C Parent/Guardian has read the Students, Parents, and Guardians Rights and Responsibilities documen Student has read the Students, Parents, and Guardians Rights and Responsibilities documer Technology Use Agreement Parent/Guardian has read and agrees with the Student Technology Acceptable Use Agreement Ves ¥ " Student has read and agrees with the Student Technology Acceptable Use Agreement Yes v * Directory Information Release Parent/Guardian allows the release of information to parent conspirations, which may include PTAs, PTDs, FLAC, hooster clubs, etc. Yes Y " Parent/Guardian allows the release of information to educational institutions and organizations, which include Santa Cruz County College Commitment, Colleges and Yes V Universities Parent/Guardian allows the release of information to the Santa Cruz Education Foundation (SCE Yes V Parent/Guardian allows the release of information to Military Recruiters Yes V Parent/Guardian agrees to the use of the student's information or photos in SCCS District digital media and communication Yes Y CDE Statewide Testing Notification* Parent/Guardian has read the CDE Statewide Testing Notification Yes Y Social Emotional Health Survey* Parent/Guardian consents to student's participation in the Social Emotional Health Survey Yes V × California Healthy Kids Survey (CHKS)* Parent/Guardian consents to student's participation in the California Healthy Kids Survey Yes V Acknowledgement Please type name of parent submitting this application Please sign of

Make sure all required information has been entered.

If you have another student to enroll, click on *add new student*.

Reminder: If student's information has a check mark, it means that it is complete. If the student is highlighted in yellow, it means required information is missing.

tudent(s) Pri	mary Household	🗸 Parent/Guardian	✓ Eme	rgency Contact	▼ Student	Completed
dent						
st Name	Last Name	Gender	School	Completed		
er	Pirate	x		1	Edit/Review	
se include all s	tudents that need to be en	rolled.				
ow - Indicates	that person is missing req	uired information. Select	the highlighted	row to continue.		

Before submitting your application, please verify that all of the information is entered in correctly.

Submit the application by clicking on the red *submit* tab.

You will receive an email confirmation that your application has been received.

Reminder: Save the 5 digit application number for reference.



Step 3: Required Documents

Registration cannot be approved until all required documents are submitted.

- Birth Certificate
- Current immunization records
- Proof of address: PG&E, water/garbage bill
- School transcripts or latest progress report (not applicable to B40 or Shoreline Middle School)
- Copy of current IEP, 504 Plan or Guardianship Documents (*if applicable*)

Required Documents

You can submit the required documents in the following ways:

- Upload the documents through the Online Registration Form
- Drop them off at the Santa Cruz High School Counseling Office
- **Email** them to <u>lissetangulo@sccs.net</u> (please include application number)

Questions?

If you need help with the registration process or have any questions, please contact the Santa Cruz High Counseling office:

- (831) 429-3960 Ext. 50300
- <u>lissetangulo@sccs.net</u>



Santa Cruz High School



Inscripción en Línea

Paso 1: Determinar su Escuela de Asistencia

Bienvenidos a Santa Cruz High School!

Para comenzar el proceso de registro,

verifique su escuela de asistencia.

Haga clic en el siguiente enlace e ingrese la dirección de su casa:

https://locator.pea.powerschool.com/?studyId=234299



Determinar su Escuela de Asistencia

Si su dirección se encuentra dentro de nuestra área de asistencia, la escuela asignada aparecera como Santa Cruz High School.

Puede continuar con el Paso 2.

0 Expl	lore the map:
0 Тор	Left side Controls:
О Тор	Right side Controls:
Brows	se assigned Schools:
Click o	on a school below to popup info on
the ma	ар
R	Westlake ES (K - 5)
1	1000 High Street
	Santa Cruz, CA 95060
R	Mission Hill MS (6 - 8)
1	425 King Street
	Santa Cruz, CA 95060
R	Santa Cruz High (9 - 12)
10	415 Walnut Avenue
1	Santa Cruz, CA 95060



Determinar su Escuela de Asistencia

Si la escuela es Harbor o Soquel, tiene que completar el formulario de transferencia dentro del distrito. La forma tiene que ser aprobada por el distrito.



Si la escuela asignada está fuera de nuestro distrito, debe de completar el formulario de transferencia entre distritos. La forma tiene que ser aprobada por el distrito.



Paso 2: Inscripción en Línea

Si ya tiene un estudiante que asiste a una escuela en el distrito de Santa Cruz, inicie su sesión en su portal para padres para comenzar el proceso de registro para el nuevo estudiante.

Si tiene alguna pregunta, comuníquese con la oficina de consejería.

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<u>lissetangulo@sccs.net</u> o (831)429-3960 Ext. 50300
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Si actualmente no tiene un estudiante que asista en el distrito de Santa Cruz, haga clic en el siguiente enlace para iniciar el proceso de registro y oprima "espanol" arriba:

Online Registration

Seleccione el año escolar apropiado y haga clic en *seguir*.



What are you registering for?*

2023-2024 (Next School Year)

Next

Ingrese la información requerida en la siguiente pantalla y seleccione *Iniciar Registro*.

Por favor revise su correo electrónico.

La dirección de correo electrónico que ingresó recibirá un correo electrónico en breve. Contendrá un enlace que le llevará a la página oficial de registro.

Importante: Habrá un número de 5 dígitos en la aplicación. Guarde este numero. Lo necesitará para referencia.



Esté preparado para proporcionar la siguiente información:

- Información de hogar- direccion y numeros de telefono
- Información para los padres- numeros de telefono de trabajo y celular, direcciones de correo electrónico
- Información del estudiante- información demográfica y de la salud/de la medicina
- Contactos de emergencia- números de teléfono

Por favor, comience a completar la solicitud.

Un asterisco rojo significa que la información es requerida y no podrá continuar a la siguiente página sin completar la información.

Student(s) Primary House	Parent/Guard	dian Completed	
rent/Guardian Name: Pe Demographics	te Pirate		
Enter the Parent/Guardian y	ou wish to enter. Please review	and complete the following:	
First Name	Pete		
Middle Name			
Last Name	Pirate	*	
Suffix	~		
Birth Date		ā."	
Gender	v -	*	
	Please check this box if this pe	erson lives at the address listed below. 300 LB Fonda Ave 500 CB - 6 5050	
		amin dial, o sool	

El distrito de Santa Cruz requiere uno de los siguientes como comprobante de domicilio:

- Factura de PG&E
- Factura de agua/gas

El documento se puede subir en *cargar comprobante de residencia* o tráigalo a la oficina de consejería de Santa Cruz High.

Si las facturas no están a su nombre, comuníquese con la oficina de consejería para obtener más información.

Continúe a la siguiente página.

La información del padre/guardián es requerida.

Si el estudiante no vive con sus padres, por favor entregue formularios de tutela a la oficina de consejería.

Ingrese información de contacto del padre/guardián.

Se requiere al menos un numero de telefono.

Stadeniq sy r minary riouse	old Parent/Guard	dian SEmergency Contact Student Completed
rent/Guardian Name: Pe	te Pirate	
Demographics		
Enter the Parent/Guardian y	ou wish to enter. Please review a	w and complete the following:
First Name	Pete	
Middle Name		
Last Name	Pirate	
Suffix	~	
Birth Date		
Gender	v *	(a
	Please check this box if this per	remon lives at the address listed below. 300 La Fonde Ave SMATA CRUZ, CA 95062
Next »		

Si ha ingresado toda la información requerida para el padre/guardian, una marca de verificación indicará completado y puede agregar un segundo padre o hacer clic en guardar y continuar.

Si la persona esta marcada en amarillo, esto indica que falta la informacion requerida. Haga clic en corregir/revisar para ingresar la información que falta.



Proporcione 3 contactos de emergencia en caso de una emergencia, si no se puede localizar a los padres.



Ingrese la información de su nuevo estudiante.

Asegúrese de que el nombre completo y la fecha de nacimiento del estudiante coincidan con la acta de nacimiento.



Se requiere la acta de nacimiento del estudiante para la inscripción.

Por favor de subir la acta de nacimiento haciendo clic en cargar verificación de edad o tráigalo a la oficina de consejería de Santa Cruz High.

licates a required field							
Student(s) Primary Ho	ousehold	Parent	Guardian	▼ Student	© Completed		
udent Name: Peter P	irate						
Demographics							
Please verify or add the inf	ormation below, and c	pdate ar	ny information that is incorrect. Please enter the s	tudent's name and gende	r exactly as it appears on th	e birth certificate.	
Legal First Name	Peter	+	Legal Gender	Non-binary ¥*		Enroliment Grade	09 * *
Legal Middle Name			Birth Date	08/10/2008	Q.*	Boundary School: Una	ble to determine
Legal Last Name	Pirate	+	Will the student be participating in a school	Ver V ×		boundary school.	
Suffix	~		athletics program (team sports)?	ies •			
Nickname			Birth Country				
Student Cell Number	() -		Is this a foreign exchange student?	No ¥*			
Student Personal Email			Highest Education Level of Either Parent	College Graduate	v •		
If you prefer not to uplo Upload Verific	ad a document, yo ation of Age	u may t	ring your documents to the school. Click Ne	xt.			
Next +							
Housing							
Student Services							
anguage Information							
Previous School							

Si su estudiante tiene alguna condición médica o de salud mental, haganoslo saber.

Debe hacer clic en los enlaces azules para ver los documentos y pasar a la siguiente página.



Se requieren los registros de vacunas del estudiante para la inscripción.

Suba los registros de vacunas haciendo clic en *cargar inmunizaciones* o tráigalo a la oficina de consejería de Santa Cruz High.

Si su estudiante tiene una tarjeta de vacunación de COVID-19, subala haciendo clic en *cargar tarjeta(s) COVID-19*.

Campus Online Registration	Application Number 4513	Application Number 4513			
Indicates a required field					
Student(s) Primary Household	Parent/Guardian				
Student Name: Peter Pirate					
Demographics					
Race Ethnicity					
Housing					
Student Services					
Language Information					
Previous School					
Tribal Enrollment					
Relationships - Parent/Guardians					
Relationships - Emergency Contacts					
Health Services - Emergency Inform	tion				
Health Services - Insurance Informa	Ion				
Health Services - Medical or Mental	ealth Conditions				
 Health Services - Medications and In 	munizations				
No medications. 🗹					
Has your student been vaccinated again	st COVID-197 Yes 🗸 "				
Have you provided the school with you	student's COVID-19 vaccination card(s)?				
Please upload a scan or photo of in may bring your documents to the s	munication records if you are registering a new student or a student who will be entering 7th grade. If you prefer not to upload a document hool.	it, yi			
Upload Immunizations					
Please upload a scan or photo of th	COVID-19 vaccination card(s). If you prefer not to upload a document, you may bring your documents to the school.				

Haga clic en los enlaces azules para ver los documentos.

Esto solo es para su información.

No necesita imprimir o firmar formularios.

Su firma al final de la solicitud indicará que ha leído y está de acuerdo con todas las partes de la solicitud.

telease Agreements		
The linked documents below are for your information only, and do not require individual signatures on the documents themselves. Your signature at the will indicate that you have read and understand all parts of the application.	e end of the application process	
Students, Parents, and Quardians Rights and Responsibilities*		
Parent/Guardian has read the Students, Parents, and Guardians Rights and Responsibilities document		
🗹 = Student has read the Students, Parents, and Guardians Rights and Responsibilities document		
Technology Use Agreement"		
Parent/Guardian has read and agrees with the Student Technology Acceptable Use Agreement	Yes 🛩 "	
Student has read and agrees with the Student Technology Acceptable Use Agreement	Yes v *	
Directory Information Release"		
Parent/Guardian allows the release of information to parent organizations, which may include PTAs, PTOs, ELAC, booster clubs, etc.	Yes 🗸 🐂	
Parent/Guardian allows the release of information to educational institutions and organizations, which include Santa Cruz County College Commitment, Colleges and Universities	Yes 💙 🎽	
Parent/Guardian allows the release of information to the Santa Cruz Education Foundation (SCEF)	Yes 🛩 "	
Parent/Guardian allows the release of information to Military Recruiters	Yes 🗸 "	
Parent/Guardian agrees to the use of the student's information or photos in SCCS District digital media and communications.	Yes 🗸 "	
CDE Statewide Testino Notification*		
Parent/Guardian has read the CDE Statewide Testing Notification	Yes 🛩 🔺	
Social Emotional Health Survey*		
Parent/Guardian consents to student's participation in the Social Emotional Health Survey	Yes 🛩 🙁	
California Healthy Kids Survey (CHKS)*		
Parent/Guardian consents to student's participation in the California Healthy Kids Survey	Yes 🗸 🗵	
Acknowledgement		
Please type name of parent submitting this application	Pete Pirate	
Prease sign on the line before.		

Asegúrese de haber ingresado toda la información requerida para su estudiante.

Si tiene otro estudiante para inscribir, haga clic en *agregar nuevo estudiante*.

Recordatorio: Si el estudiante tiene una marca de verificación, significa que esta completo. Si el estudiante esta resaltado en amarillo, segnifica que falta informacion requerida.

itudent(s) Pri	mary Household	/ Parent/Guardian	✓ Eme	rgency Contact	▼ Student	Completed
udent						
irst Name	Last Name	Gender	School	Completed		
eter	Pirate	х		1	Edit/Review)
ease include all s	t <mark>udents that need to be e</mark> n	olled.				
ellow - Indicates	that person is missing requ	uired information. Select	the highlighted	row to continue.		

Antes de enviar la inscripción, verifique que toda la información ingresada sea correcta.

Envíe la solicitud haciendo clic en *Enviar*.

Luego recibirá un correo electrónico de confirmación de que su inscripción ha sido recibida.

Recordatorio: Guarde su numero de solicitud de 5 dígitos para referencia.



Paso 3: Documentos Requeridos

La inscripción no será aprobada hasta que se presenten todos los documentos requeridos.

- Certificado de Nacimiento
- Registros de Vacunación
- Comprobante de Domicilio: PG&E, agua/basura
- Expediente Académico o Informe de Progreso más reciente
- Copia del IEP actual, Plan 504, Documentos de Tutela (Si es aplicable)

Paso 3: Documentos Requeridos

Puede enviar los documentos requeridos de las siguientes maneras:

- Subir los documentos a través de la registración en Línea
- Traer los documentos a la oficina de consejería de SCHS
- Enviarlos por correo electrónico a <u>lissetangulo@sccs.net</u> (por favor incluya el número de su aplicación)

Paso 4: Portal de Padres

Una vez que su solicitud haya sido revisada y aprobada, recibirá un correo electrónico para crear su portal para padres.

Todos los padres deben crear un portal de padres.

Preguntas?

Si necesita ayuda con la inscripción o si tiene alguna pregunta, comuníquese con la oficina de consejería de Santa Cruz High.

- (831) 429-3960 Ext. 50300
- <u>lissetangulo@sccs.net</u>

