FORM TO CREATE A PARENT PORTAL ACCOUNT

Student Name(s)  School
(Please print)

_______________________________  ____________________________
_______________________________  ____________________________
_______________________________  ____________________________
_______________________________  ____________________________
_______________________________  ____________________________

Family Password _____________________________________________________
(any combination of letters/numbers)

E-Mail Address (if you have one) ________________________________________

Parent Name (Please print) ________________________________

Signature __________________________________________________________

Please return the form in an envelope marked “PARENT PORTAL” to one of your children’s schools.