

Parent/Guardian: Please complete this form and present it to the parent coordinator or family access manager at your school in order to create a NYC Schools account. Your school will complete all shaded sections.

Please complete all non-shaded sections.

| | | | | | | | | | | | | |
|----------------------|-----------|--|--|--------------------------|--|--|-------------|--|--|--|--|--|
| S T U D E N T | SCHOOL | | | N.Y.C. STUDENT ID NUMBER | | | | | | | | |
| | | | | | | | | | | | | |
| | LAST NAME | | | FIRST NAME | | | MIDDLE NAME | | | | | |
| | | | | | | | | | | | | |

Parent/Guardian requesting an account:

| | | | | | | | | |
|---|---|--|------------|--|-----------------------------------|--|-------------------------|--|
| A D U L T | LAST NAME | | FIRST NAME | | AUTHORIZATION | | RELATIONSHIP TO STUDENT | |
| | | | | | | | | |
| | EMAIL ADDRESS* (this will be your user ID for your NYC Schools account) | | | | DOES THE STUDENT RESIDE WITH YOU? | | | |
| | | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | |
| PROOF OF IDENTIFICATION PROVIDED (School completes when identification is presented by the adult) | | | | ADDITIONAL NOTES: | | | | |
| <input type="checkbox"/> Driver License, Permit, State ID <input type="checkbox"/> Passport <input type="checkbox"/> IDNYC <input type="checkbox"/> Other document _____ | | | | | | | | |

ADDITIONAL STUDENTS (OPTIONAL)

Complete the following section if you have additional students attending a NYC public school to add to your NYC Schools account. Schools can use the ATS Student Search (SBIO) function to look-up the NYC student ID number if it is unknown or incorrect.

| S I B L I N G S | SIBLING LAST NAME | SIBLING FIRST NAME | GENDER | DATE OF BIRTH (DD/MM/YYYY) | NYC STUDENT ID # | DISTRICT/SCHOOL | |
|------------------------|-------------------|--------------------|--------|----------------------------|------------------|-----------------|--|
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|---------------------------------|------|
| SIGNATURE OF PARENT OR GUARDIAN | DATE |
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|---|------|
| PROCESSED BY | DATE |
| | |
| Provide parent or guardian with temporary password on FAM Account Receipt. File this form for your records. | |



Learn more by visiting:
<http://schools.nyc.gov/nycschools>