

How to Verify/Register a Student that attended a Rutherford County School Last Year

The screenshot shows the Skyward Family Access interface. At the top left is the Skyward logo and 'Family Access' text. A navigation menu on the left includes Home, Student Data Verification Form, Attendance, Student Info, Busing, Discipline, Portfolio, and Login History. A central notification box states: 'Student Data Verification Form is now open until 08/31/2020'. Below this, it says 'Student Data Verification Form at [redacted] for the 2020-2021 school year is now open, yet has not been completed for [redacted]'. A link 'Go to Student Data Verification Form for [redacted]' is provided. A green arrow points to this link with the text: 'click here to start the verification process and to add the missing/needed information'. To the right, there is an 'Upcoming Events' section for 'Wed Aug 5, 2020'.

This is the next screen that comes up:

The screenshot shows the 'Student Data Verification Form' page for the 2020-2021 school year. A 'District Message' states: 'Please have the following required documents ready to be uploaded: 1. Proof of Residency - Proof of residence is current utility bills - electric, gas or water - with the parent's name and address printed on it. If parents have not been living at the residence long enough to have a utility bill, a lease on a house or apartment will be accepted, or you can get a statement from the utility company showing you have started service at the specific address.' A blue arrow points to this message with the text: 'These are the documents still needed from you.' On the right side, there is a list of 13 items to be completed, with 'a. Student Information' highlighted. A blue arrow points to this item with the text: 'Click on a. Student Information to continue or click the next button to continue'. At the bottom right, there are 'Next' and 'Close and Finish Later' buttons.

1.a. Student Information

Student Data Verification Form

2020-2021

Step 1a. Verify Student Information: Student Information (Required) Undo

A copy of the Rutherford County School System Student Handbook and Code of Conduct can be found at www.rcschools.net, under the Resources & Info menu. Resources & Information for Parents. You will be required to submit an electronic form stating that you have access to the online version of the the Student Handbook.

General Information

First: Middle:

Last: Suffix:

Birthdate: Gender:

* Language: **Please check mark if you have internet access and a device.**

* Native Language:

Do you have internet access?

Do you have a device to access eLearning material?

Military Connected

Home Phone: (615) Ext:

Ext:

Ext:

Birth Country:

Birth State:

Birth County:

Allow Publication of Student's Name for:

AUP:

Health Screening:

You have to click this button to save any changes.

If the box is grayed out, you can't change the information.

If the box is lighter, you can type in those boxes.

continue

(*) Indicates a required field.

Undo **District Message**

Required to **1. Verify Student Information**

a. Student Information

b. Family Address

Look for the green checkmark that it is complete when you go on to the next step.

2. b. Family Address

Student Data Verification Form

2020-2021

Step 1b. Verify Student Information: Family Address (Required) Undo

A copy of the Rutherford County School System Student Handbook and Code of Conduct can be found at www.rcschools.net, under the Resources & Info menu. Resources & Information for Parents. You will be required to submit an electronic form stating that you have access to the online version of the the Student Handbook.

Address Preview Address

Street Number: Street Dir:

SUD: #

Address 2:

Zip Code: Plus 4: City/State:

County:

Verify information, then click on the Complete Step 1b Only button BEFORE going to the next section.

Mailing Address Same as Address **Preview Mailing Address**

Street Number: Street Dir: Street Name:

SUD: # P.O. Box:

Address 2:

Zip Code: Plus 4: City/State:

District Message

1. Verify Student Information

a. Student Information

b. Family Address

Family Information

Emergency Information

e. Emergency Contacts

f. Health Information

2. Student Residency Questionnaire

3. Home Language Survey

4. Health information Form

5. Consent for Immunization Sharing

6. Instructional Technology Opt-Out

7. SPED/504 Survey

8. Parent Occupational Survey

9. Parent Check List

10. Limited Privacy Release for Distance Learning Recordings

11. Upload Attachments

12. Nutrition Services



1. c. Family Information

Step 1c. Verify Student Information: Family Information (Required) Undo

A copy of the Rutherford County School System Student Handbook and Code of Conduct can be found at www.rcschools.net, under the Resources & Info menu, Resources & Information for Parents. You will be required to submit an electronic form stating that you have access to the online version of the the Student Handbook.

Family Options

* Home Language: Receive a Paper Copy of Report Card

Guardian Number: 1
 Name:
 Custodial Confidential
 Relationship: (615) Ext:
 Employer:
 Home Email:

Guardian Number: 2
 Name:
 Custodial Confidential
 Relationship: (615) Ext:
 Employer:
 Home Email:

Make all needed changes, then click the Complete Step 1c Only button

(*) Indicates a required field.

District Message

- 1. Verify Student Information
 - ✓ a. Student Information
 - ✓ b. Family Address
 - c. Family Information**
 - d. Emergency Information
 - e. Emergency Contacts
 - f. Health Information
- 2. Student Residency Questionnaire
- 3. Home Language Survey
- 4. Health information Form
- 5. Consent for Immunization
- 6. Instructional Technology Opt-Out
- 7. SPED/504 Survey
- 8. Parent/Teacher/Student Survey
- 9. Parent Check List
- 10. Limited Privacy Release for Distance Learning Recordings
- 11. Upload Attachments
- 12. Nutrition Services
- 13. Complete Student Data Verification Form



1. d. Emergency Information

Step 1d. Verify Student Information: Emergency Information Undo

(Required)

A copy of the Rutherford County School System Student Handbook and Code of Conduct can be found at www.rcschools.net, under the Resources & Info menu, Resources & Information for Parents. You will be required to submit an electronic form stating that you have access to the online version of the the Student Handbook.

Complete Step 1d Only

1.e. Emergency Contacts

Step 1e. Verify Student Information: Emergency Contacts Undo

(Required)

A copy of the Rutherford County School System Student Handbook and Code of Conduct can be found at www.rcschools.net, under the Resources & Info menu, Resources & Information for Parents. You will be required to submit an electronic form stating that you have access to the online version of the the Student Handbook.

Add a person

Add Emergency Contact

Delete this Emergency Contact

Contact Number:

First:

Middle:

Last:

Relationship:

Primary Phone: (615) Ext:

Other (615) Ext:

Ext:

Pick Up:

Comment:

Complete Step 1e Only

District Message

- 1. Verify Student Information
- 2. Student Residency Questionnaire
- 3. Home Language Survey
- 4. Health information Form
- 5. Consent for Immunization Sharing
- 6. Instructional Technology
- 7. SPED/504 Survey
- 8. Parent Occupational Survey
- 9. Parent Check List

e. Emergency Contact

1.f. Health Information

Step 1f. Verify Student Information: Health Information (Required) Undo

A copy of the Rutherford County School System Student Handbook and Code of Conduct can be found at www.rcschools.net under the Resources & Info menu. Resources & Information for Parents. You will be required to submit an electronic form stating that you have access to the online version of the Student Handbook.

Health Problems: **You can type in these boxes and make any changes.**

Allergy Notes:

Medication Notes:

Hospital Notes: **Click to save**

Vision Notes:

Complete Step 1f Only

District Message

1. Verify Student Information
 - ✓ a. Student Information
 - ✓ b. Family Address
 - ✓ c. Family Information
 - ✓ d. Emergency Information
 - ✓ e. Emergency Contacts
 - f. Health Information**
2. Student Residency Questionnaire
3. Home Language Survey
4. Health information Form
5. Consent for Immunization Sharing
6. Instructional Technology Opt-Out
7. SPED/504 Survey
8. Parent Occupational Survey
9. Parent Check List
10. Limited Privacy Release for Distance Learning Recordings
11. Upload Attachments
12. Nutrition Services
13. Complete Student Data Verification Form

Previous Step Next Step

Close and Finish Later

2. Student Residency Questionnaire

Step 2. Student Residency Questionnaire (Required)

The McKinney-Vento Homeless Assistance Act (Title IX, Part C of the No Child Left Behind Act) defines "homeless" as "individuals who lack a fixed, regular, and adequate nighttime residence." This includes students who "are TEMPORARILY sharing the house of other persons due to loss of housing or economic hardship." No student will be discriminated against based upon any of this confidential information provided. The answers you give will help determine the services your student may be eligible

Print View Full Screen

STUDENT RESIDENCY QUESTIONNAIRE

Student Name: Grade: School:

The McKinney-Vento Homeless Assistance Act (Title IX, Part C of the No Child Left Behind Act) defines "homeless" as "individuals who lack a fixed, regular, and adequate nighttime residence." This includes students who "are TEMPORARILY sharing the house of other persons due to loss of housing or economic hardship." No student will be discriminated against based upon any of this confidential information provided. The answers you give will be eligible to receive.

Has this student been identified as homeless or ATLAS in another school?

If your family is experiencing temporary homelessness, please check the following statement that applies and fill out address

Living in a shelter/transitional housing – name of agency

Living on the street, abandoned building, in car, trailer, campground, public places not fit for habitation – briefly explain

Make needed changes and click the Complete Step 2 Only button

Living in hotel/motel due to lack of other suitable housing – name and address of hotel/motel:

Doubled up; TEMPORARILY living with family or friends due to loss of housing or financial hardship. Address:

Is a parent living in the home with the student?

Complete Step 2 Only

District Message

1. Verify Student Information
 - ✓ Completed 07/29/2020 4:55pm
 - ✓ a. Student Information
 - ✓ b. Family Address
 - ✓ c. Family Information
 - ✓ d. Emergency Information
 - ✓ e. Emergency Contacts
 - ✓ f. Health Information
- 2. Student Residency Questionnaire**
3. Home Language Survey
4. Health information Form
5. Consent for Immunization Sharing
6. Instructional Technology Opt-Out
7. SPED/504 Survey
8. Parent Occupational Survey
9. Parent Check List
10. Limited Privacy Release for Distance Learning Recordings
11. Upload Attachments
12. Nutrition Services
13. Complete Student Data Verification Form

Previous Step Next Step

Close and Finish Later

3. Home Language Survey

Step 3. Home Language Survey (Optional)

Print I do not wish to fill out this optional form View Full Screen

HOME LANGUAGE SURVEY
ENCUESTA DEL IDIOMA EN EL HOGAR

Student Name:
Nombre del Estudiante

School Entering: Grade:
Escuela a la que Entra Grado

1. What is the first language this student learned to speak?
¿Cuál es el primer idioma que este estudiante aprendió a hablar?
2. What language does this student speak most often outside of school?
¿Cuál idioma habla este estudiante más a menudo fuera de la escuela?
3. What language do people usually speak in this student's home?
¿Cuál idioma se habla usualmente en la casa de este estudiante?
4. In what country was this student born?
¿En qué país nació este estudiante?
5. What date did this student first move to the United States?
¿En qué fecha se mudó este estudiante a los Estados Unidos? (Skip if student was born in the U.S.)
6. What date did this student first enter a U.S. school?
¿En qué fecha entró este estudiante por primera vez a una escuela en los Estados Unidos?
7. Name and address of school previously attended:
Nombre y dirección de la escuela a la que asistió anteriormente.
8. Parent/Guardian Name and Phone Number:
Nombre del padre o tutor y el número del teléfono.

*Language translation services are available.
Servicios de interpretación y traducción disponibles.

THE HOME LANGUAGE SURVEY IS ADMINISTERED FOR IDENTIFICATION OF NON-ENGLISH LANGUAGE BILINGUAL CAPABILITY IN COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964 AND TITLE I, SECTION 3101 UNDER NATIONAL ORIGIN.

Verify and click the Complete Step 3 Only button

Complete Step 3 Only

District Message

1. Verify Student Information
Completed 07/29/2020 4:55pm
2. Student Residency Questionnaire
Completed 07/29/2020 5:02pm
3. Home Language Survey
Completed 07/29/2020 5:05pm
4. Health information Form
5. Consent for Immunization Sharing
6. Instructional Technology Opt-Out
7. SPED/504 Survey
8. Parent Occupational Survey
9. Parent Check List
10. Limited Privacy Release for Distance Learning Recordings
11. Upload Attachments
12. Nutrition Services
13. Complete Student Data Verification Form

Previous Step Next Step

Close and Finish Later

4. Health Information Form

Step 4. Health information Form (Required)

Print View Full Screen

RUTHERFORD COUNTY SCHOOLS HEALTH INFORMATION FORM
Date Completed:

Dear Parent/Guardian: Please complete and return this form to the School Nurse as soon as possible. This information is for the use of school personnel to maintain and promote the student's health/safety.

Student Name: Gender: Date of Birth:

School: Homeroom or 1st Period Teacher:

Receives Special Education Services: Has a 504:

Student Transportation Method: If other,

Name of School Last Attended:

Student's Primary Doctor/Health Care Provider:

Doctor's Office Phone Number:

Other Health Care Provider (i.e., Specialist):

Specialist Phone Number:

Please check if your child will need to take any medications during the day? If yes, contact the school nurse and complete the following:

The school nurse may communicate with the student's healthcare provider(s) regarding health concerns. If a health condition is marked for any of these conditions, or if there are other health concerns, it is the parent/guardian's responsibility to contact the school nurse each year to develop a health/safety plan for use during school.

Please place a check next to any health problem(s) and explain as appropriate in the space provided:

Disease/Condition		Please explain/elaborate here
ADD or ADHD diagnosed	<input type="checkbox"/>	What medications are prescribed for this? <input type="text"/>
Asthma (in last 2 years)	<input type="checkbox"/>	Is a rescue inhaler currently prescribed? <input type="checkbox"/> Other medications: <input type="text"/>

Verify/Answer - you can make changes

Pull down to fill out the entire form.

District Message

1. Verify Student Information
Completed 07/29/2020 4:55pm
2. Student Residency Questionnaire
Completed 07/29/2020 5:02pm
3. Home Language Survey
Completed 07/29/2020 5:05pm
4. Health information Form
5. Consent for Immunization Sharing
6. Instructional Technology Opt-Out
7. SPED/504 Survey
8. Parent Occupational Survey
9. Parent Check List
10. Limited Privacy Release for Distance Learning Recordings
11. Upload Attachments
12. Nutrition Services
13. Complete Student Data Verification Form

Previous Step Next Step

Life-Threatening Allergies	<input type="checkbox"/>	If yes, to what?	
		Is an Epinephrine pen prescribed? <input type="checkbox"/>	Has it ever been used? <input type="checkbox"/>
		Date last used: _____	
		Is Benadryl given with the Epinephrine? <input type="checkbox"/>	
Dietary Restrictions	<input type="checkbox"/>	Dairy <input type="checkbox"/>	Gluten <input type="checkbox"/>
		Pork <input type="checkbox"/>	Other <input type="checkbox"/>
NON-Life Threatening Allergies: _____			
Does your child take medication regularly or have other conditions not listed above? <input type="checkbox"/> If checked then what: _____			
Parent/Guardian Information			
Parent/Guardian Name	Phone		
	fill in if needed		
Emergency Contact Information			
Name	Relationship to Student	Primary Phone	
JILL HINES	MOTHER	(615) 223-5710	
LYMAN HINES	FATHER	(615) 223-5710	
RYAN HINES	BROTHER	(615) 720-7888	

** By submitting this form you are agreeing that you have read and understood the above statements and that the information of your knowledge

Emergency Contacts should have auto populated.

RCBOE Policy 6.405 Medicines
 If under exceptional circumstances a child is required to take non-prescription or prescription medication during school hours administer the medication, only the principal or the principal's designee will assist in self-administration of the medication if administer medicine with assistance in compliance with the following regulations:
 Written instructions signed by the parent will be required and will include:

1. Child's name;
2. Name of medication;
3. Name of physician;
4. Time to be self-administered.

Click to save your progress

Complete Step 4 Only

5. Consent for Immunization Sharing

Step 5. Consent for Immunization Sharing (Required) Completed 07/29/2020 5:14pm

Date Created	Time Created	cbx/do	cbx/dont	Stude
07/29/2020	5:14 pm	Yes	No	225

1 records displayed

Complete it if not done already, but you can click on the Edit Step 5 button if needed

Edit Step 5

District Message

1. Verify Student Information
Completed 07/29/2020 4:55pm
- a. Student Information
- b. Family Address
- c. Family Information
- d. Emergency Information
- e. Emergency Contacts
- f. Health Information
2. Student Residency Questionnaire
Completed 07/29/2020 5:02pm
3. Home Language Survey
Completed 07/29/2020 5:05pm
4. Information Form
Completed 07/29/2020 5:13pm
- 5. Consent for Immunization Sharing**
Completed 07/29/2020 5:14pm
6. Instructional Technology Opt-Out
7. SPED/504 Survey
8. Parent Occupational Survey
9. Parent Check List
10. Limited Privacy Release for Distance Learning Recordings
11. Upload Attachments
12. Nutrition Services
13. Complete Student Data Verification Form

Previous Step Next Step

6. Instructional Technology Opt-Out

Step 6. Instructional Technology Opt-Out (Optional)

I do not wish to fill out this optional form

**Rutherford County Schools
Office of Instructional Technology**

Dear Parent/Guardian:

The District's Policies and Procedures for Student Access to Networked Information (Policy 4.40 in the Student Handbook and Code of Conduct). The policies and procedures explain that discipline of technology may be imposed against a student for inappropriate use of technology at school.

If you do not want your student to have access to networked information and/or email Jeannie Williams at williamsje@rcschools.net and you student's principal at Residency Questionnaire

Rutherford County Board of Education
Office of Instructional Technology
2240 Southpark Drive
Murfreesboro, TN 37128

If you do not want your student to have access to networked information and/or email Jeannie Williams at williamsje@rcschools.net and you student's principal at Residency Questionnaire

Wed Jul 29 2020 17:17:33 GMT-0500 (Central Daylight Time)

Click to save

District Message

1. Verify Student Information
✓ Completed 07/29/2020 4:55pm
- ✓ a. Student Information
- ✓ b. Family Address
- ✓ c. Family Information
- ✓ d. Emergency Information
- ✓ e. Emergency Contacts
- ✓ f. Health Information
2. Student Residency Questionnaire
✓ Completed 07/29/2020 5:02pm
3. Home Language Survey
✓ Completed 07/29/2020 5:05pm
4. Health information Form
✓ Completed 07/29/2020 5:13pm
5. Consent for Immunization Sharing
✓ Completed 07/29/2020 5:14pm
- 6. Instructional Technology Opt-Out**
7. SPED/504 Survey
8. Parent Occupational Survey
9. Parent Check List
10. Limited Privacy Release for Distance Learning Recordings
11. Upload Attachments
12. Nutrition Services
13. Complete Student Data Verification Form

7. SPED/504 Survey

Step 7. SPED/504 Survey (Required)

Special Education/504 Survey

Has this student ever been evaluated for any of the following:

Special Education

504

Intellectually Gifted

Wed Jul 29 2020 17:31:35 GMT-0500 (Central Daylight Time)

Verify or Check and click the Complete Step 7 Only button

District Message

1. Verify Student Information
✓ Completed 07/29/2020 4:55pm
- ✓ a. Student Information
- ✓ b. Family Address
- ✓ c. Family Information
- ✓ d. Emergency Information
- ✓ e. Emergency Contacts
- ✓ f. Health Information
2. Student Residency Questionnaire
✓ Completed 07/29/2020 5:02pm
3. Home Language Survey
✓ Completed 07/29/2020 5:05pm
4. Health information Form
✓ Completed 07/29/2020 5:13pm
5. Consent for Immunization Sharing
✓ Completed 07/29/2020 5:14pm
6. Instructional Technology Opt-Out
✓ Completed 07/29/2020 5:30pm
- 7. SPED/504 Survey**
8. Parent Occupational Survey
9. Parent Check List
10. Limited Privacy Release for Distance Learning Recordings
11. Upload Attachments
12. Nutrition Services
13. Complete Student Data Verification Form

8. Parent Occupational Survey (Required)

Step 8. Parent Occupational Survey (Required)

Print View Full Screen

Tennessee Parent Occupational Survey

In order to better serve your child, our school district wants to identify students who may qualify to services, such as tutoring, school supplies, free or reduced-price lunch, summer camps, and other provided below will be kept confidential. Please answer the following questions and return this

Today's Date: _____ Parent/Guardian First & Last Name: _____
 Student First Name: _____
 School Name: _____ Student Grade: _____

1. Have you or an immediate family member performed any of the jobs listed below seasonally, in any part of the United States, in the past three years?

No
 Yes Check all that apply and list the total number of months worked:

Agriculture/Field Work (planting, picking, sorting crops, soil preparation; irrigation; fumigation) Total Months Worked: _____
 Processing & Packaging (fruit, vegetables, chicken, eggs, pork, beef) Total Months Worked: _____
 Dairy/Rounding up Total Months Worked: _____

Complete Step 8 Only

Annotations:
 - "You can click to view this Full Screen" points to the "View Full Screen" button.
 - "Fill out/Verify - pull down to view entire form if staying in this view." points to the form fields.
 - "Click to save" points to the "Complete Step 8 Only" button.

9. Parent Check List

Step 9. Parent Check List (Required)

View Full Screen

Gender: _____ Grad Yr/Grade: _____ Other ID: 1

2020-2021 PARENT CHECK LIST

Grade: _____ Homeroom Teacher: _____

County Board of Education requires your signature for the following items. Please check each item to certify that you received a copy of the school agenda, if my school provides one.

County School System's Code of Conduct. I have accessed the Student Handbook online by going to rcschools.net and select the resource tab. By initialing this document, I agree that I have access to the Student Handbook, and I understand that my student must adhere to the County Board of Education Policies and Procedures.

Liability Waiver. I hereby agree that I will be responsible for any damage to or loss of any personal property of my child that is brought to school. I will reimburse the school for the value of any book or books that are damaged, destroyed, or misplaced, when my child has used during the school year.

Library Agreement. My child has my permission to borrow books from the school library. In the event a book is lost or damaged, I will pay a cost of replacement.

County Attendance Policy & Procedures. I have accessed the Student Handbook online by going to rcschools.net and select the resource tab. By initialing this document, I agree that I understand the County Board of Education Policies and Procedures regarding student attendance.

Parent Notice regarding student fees and I understand the approved fee list is in the Parent Handbook on the school system website.

I am responsible for any student debt incurred by my child including lunch charges, damaged equipment/supplies, or vandalism. I will be required to drop the course.

Parent Notice regarding student fees and I understand the approved fee list is in the Parent Handbook on the school system website.

Options in Case of Early Dismissal (check each permissible option)

Bus home (Bus # _____)

Bus with a friend or family member (Bus # _____)

I will be picked up as a car rider by the adults listed below. If you choose this option, please make sure the driver is aware that you are responsible for the child after the announced early dismissal time.

Complete Step 9 Only

Annotations:
 - "Fill out the entire form" and "Then click Complete Step 9" are written in green text over the form content.
 - A blue arrow points from the "Complete Step 9 Only" button to the "View Full Screen" button.

10. Limited Privacy Release for Distance Learning Recordings

10. Limited Privacy Release for Distance Learning Recordings

Name: [Redacted] Gender: [Redacted] Grad Yr/Grade: [Redacted] Other ID: [Redacted]

View Full Screen

Save

Save and Print

Back

Click to view Full Screen

LIMITED PRIVACY RELEASE FOR DISTANCE LEARNING RECORDINGS

STUDENT NAME: [Redacted]

Filming/Streaming of In-Person Classes

RCS has created a distance learning option for students. As part of that process, teachers and staff may film the small groups via a live stream or a recorded session to show with learners who are at home. Teachers and staff information about students during these sessions, and students will be informed when the class is being recorded in a classroom that would involve a student participating in a live stream will be ended immediately, and the recording will be deleted. During filming, students may appear on the recording. Their participation in that portion of the recording, including students asking questions or answering questions may have their voices recorded. However, teachers are to be filmed.

By submitting this form, I acknowledge that my child's classes may be recorded for the limited purpose of distance learning. I consent to my child participating in the class and limited appearing on the recording.

Please type Parent/Guardian Name: [Redacted]

Complete Step 10 Only

1. Verify Student Information
Completed 07/29/2020 4:55pm

a. Student Information

b. Family Address

c. Family Information

d. Emergency Information

e. Emergency Contacts

f. Health Information

2. Student Residency Questionnaire
Completed 07/29/2020 5:02pm

3. Home Language Survey
Completed 07/29/2020 5:05pm

4. Health information Form
Completed 07/29/2020 5:13pm

5. Consent for Immunization Sharing
Completed 07/29/2020 5:14pm

6. Instructional Technology Opt-Out
Completed 07/29/2020 5:30pm

7. SPED/504 Survey
Completed 07/29/2020 5:32pm

8. Parent Occupational Survey
Completed 07/29/2020 5:35pm

9. Parent Check List
Completed 07/29/2020 5:38pm

Click Save in the upper right corner and click the Complete Step 10 Only button

11. Upload Attachments

Step 11. Upload Attachments (Required)

An updated Immunization Record is required in order to finish registration for 7th grade.

* Proof of Residence 1: Choose File No file chosen

Proof of Residence 2: Choose File No file chosen

Click to save

Complete Step 11 Only

(*) Indicates a required field.

This is where you upload Proof of Residence - a current utility bill (July 2020) electric, gas or water with the parents name and address printed on it.

If you are on a zone exemption, this is where you upload it.

District Message

1. Verify Student Information
Completed 07/29/2020 4:55pm

a. Student Information

b. Family Address

c. Family Information

d. Emergency Information

e. Emergency Contacts

f. Health Information

2. Student Residency Questionnaire
Completed 07/29/2020 5:02pm

3. Home Language Survey
Completed 07/29/2020 5:05pm

4. Health information Form
Completed 07/29/2020 5:13pm

5. Consent for Immunization Sharing
Completed 07/29/2020 5:14pm

6. Instructional Technology Opt-Out
Completed 07/29/2020 5:30pm

12. Nutrition Services

Step 12. Nutrition Services (Required)

This is the Online electronic application for free and reduced priced meals for the USDA's National School Lunch & School Breakfast Programs.

We highly encourage all parents to apply as the process usually takes less than 5 minutes. This website will guide you through the application process. When you are ready to apply, click the 'Apply for Free and Reduced Meals' link below to begin.

View Full Screen

Calendar | Employee Email | Skyward | School Messenger

RCS
Rutherford County Schools

Rutherford County Schools

Free and Reduced Online Application and MyPayments Plus

The links below will take you to "How to" videos and the links for applying for Free and Reduced Meals, as well as the MyPayments Plus website.

APPLY ONLINE FOR THE FREE AND REDUCED MEAL PROGRAM

Submitting a Free and Reduced Meal Program application has never been faster.

Schools Parent Portal Board Calendar

Click to Save

Complete Step 12 Only

District message

1. Verify Student Information
Completed 07/29/2020 4:55pm
 - a. Student Information
 - b. Family Address
 - c. Family Information
 - d. Emergency Information
 - e. Emergency Contacts
 - f. Health Information
2. Student Residency Questionnaire
Completed 07/29/2020 5:02pm
3. Home Language Survey
Completed 07/29/2020 5:05pm
4. Health information Form
Completed 07/29/2020 5:13pm
5. Consent for Immunization Sharing
Completed 07/29/2020 5:14pm
6. Instructional Technology Opt-Out
Completed 07/29/2020 5:30pm
7. SPED/504 Survey
Completed 07/29/2020 5:32pm
8. Parent Occupational Survey
Completed 07/29/2020 5:35pm
9. Parent Check List
Completed 07/29/2020 5:38pm
10. Limited Privacy Release for Distance Learning Recordings
Completed 07/29/2020 5:41pm
11. Unlabeled Attachments

Last Step! 13. Complete Student Data Verification Form

Step 13. Complete Student Data Verification Form (Required)

By completing Student Data Verification Form, you are confirming that the Steps below have been finished. Are you sure you want to complete Student Data Verification Form for JACK?

Review Student Data Verification Form Steps

Step 1) Verify Student Information	Completed 07/29/2020 4:55pm
<i>No Requested Changes exist for Step 1.</i>	
Step 2) Student Residency Questionnaire	Completed 07/29/2020 5:02pm
Step 3) Home Language Survey	Completed 07/29/2020 5:05pm
Step 4) Health information Form	Completed 07/29/2020 5:13pm
Step 5) Consent for Immunization Sharing	Completed 07/29/2020 5:14pm
Step 6) Instructional Technology Opt-Out	Completed 07/29/2020 5:30pm
Step 7) SPED/504 Survey	Completed 07/29/2020 5:32pm
Step 8) Parent Occupational Survey	Completed 07/29/2020 5:35pm
Step 9) Parent Check List	Completed 07/29/2020 5:38pm
Step 10) Limited Privacy Release for Distance Learning Recordings	Completed 07/29/2020 5:41pm
Step 11) Upload Attachments	Completed 07/29/2020 5:47pm
Step 12) Nutrition Services	Completed 07/29/2020 5:49pm

Guardian Name: [] Guardian Address: []

Submit Student Data Verification Form

When all of this shows Completed, and all the green checkmarks, click the Submit Student Data Verification Form

District Message

1. Verify Student Information
Completed 07/29/2020 4:55pm
 - a. Student Information
 - b. Family Address
 - c. Family Information
 - d. Emergency Information
 - e. Emergency Contacts
 - f. Health Information
2. Student Residency Questionnaire
Completed 07/29/2020 5:02pm
3. Home Language Survey
Completed 07/29/2020 5:05pm
4. Health information Form
Completed 07/29/2020 5:13pm
5. Consent for Immunization Sharing
Completed 07/29/2020 5:14pm
6. Instructional Technology Opt-Out
Completed 07/29/2020 5:30pm
7. SPED/504 Survey
Completed 07/29/2020 5:32pm
8. Parent Occupational Survey

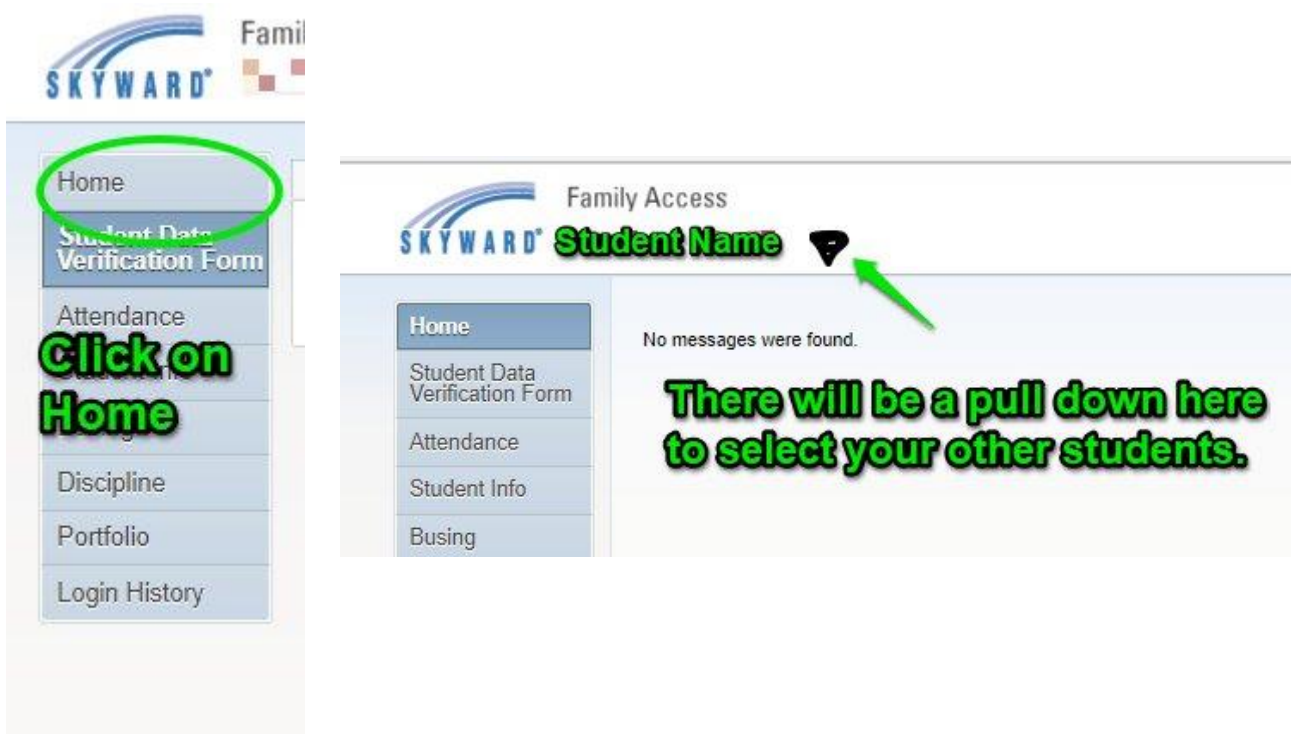
This is what pops up next:

Student Data Verification Form was successfully completed and submitted to the district for [] on Wed Jul 29, 2020 5:58pm by []

Go back to review completed steps



Mark Student Data Verification Form as not completed and make changes



Now, what about a 2nd student?



And go through the process again!

You should receive an email saying that your child has been successfully registered for the 2020-2021 school year:

Student Name has been successfully registered for the 2020-2021 School Year.  

 noreply 5:58 PM
to 

Parent Name,

Rutherford County Schools Online Registration has been completed for this child. Please review the Steps below and contact the district if there are any errors.
