



# Mount Vernon City School District ONLINE REGISTRATION PROCESS

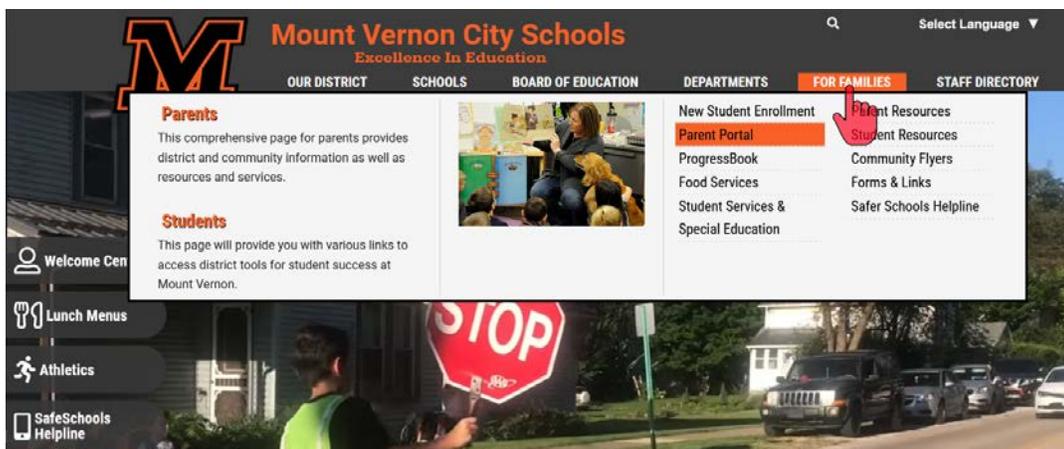
**BEFORE YOU BEGIN** Please allow approximately 30 minutes for the completion of the District's online registration form. For ease of use, make sure to complete the online registration using a desktop or laptop computer. Do not attempt to enroll on a mobile device.

Before you begin, have the following information ready:

- phone numbers and email addresses for work and home,
- student health information,
- emergency contact information.

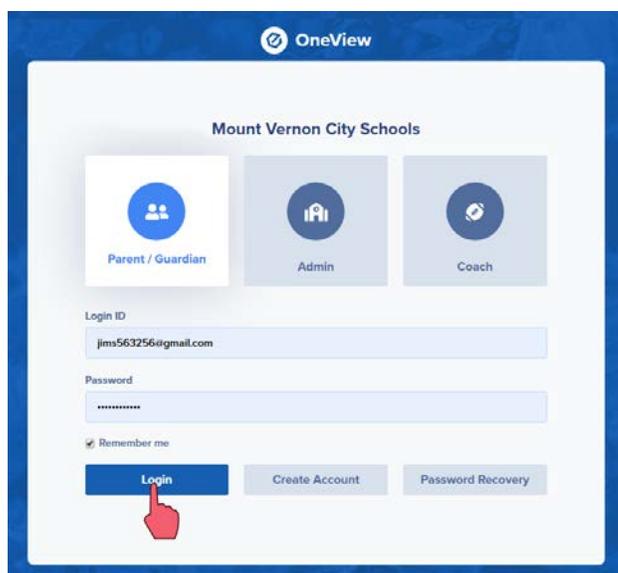
This is a three-step process that allows parents to complete the registration forms online and then set up a time to bring the necessary documents to the Welcome Center to finalize registration.

Start at the district website, [www.mvcsd.us](http://www.mvcsd.us) then hover over **[FOR FAMILIES]** and select **[Parent Portal]** in the pull down menu.

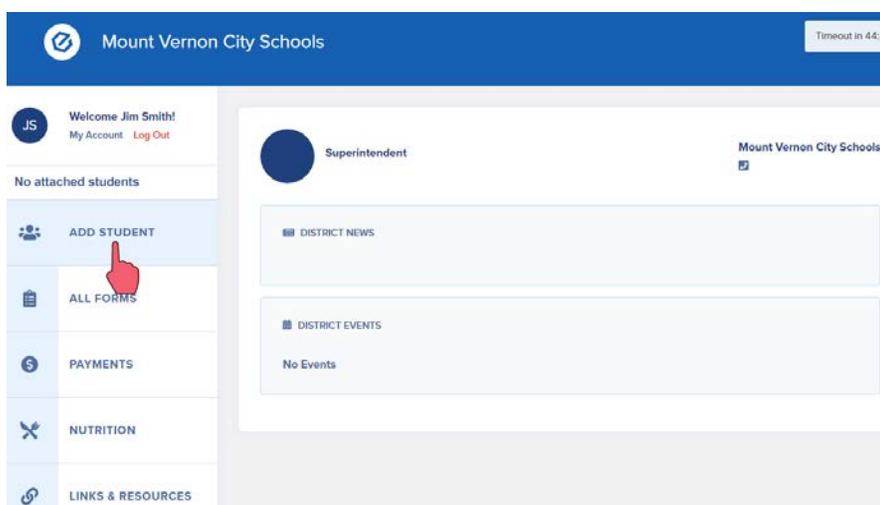


You will be taken to the OneView Parent Login page.

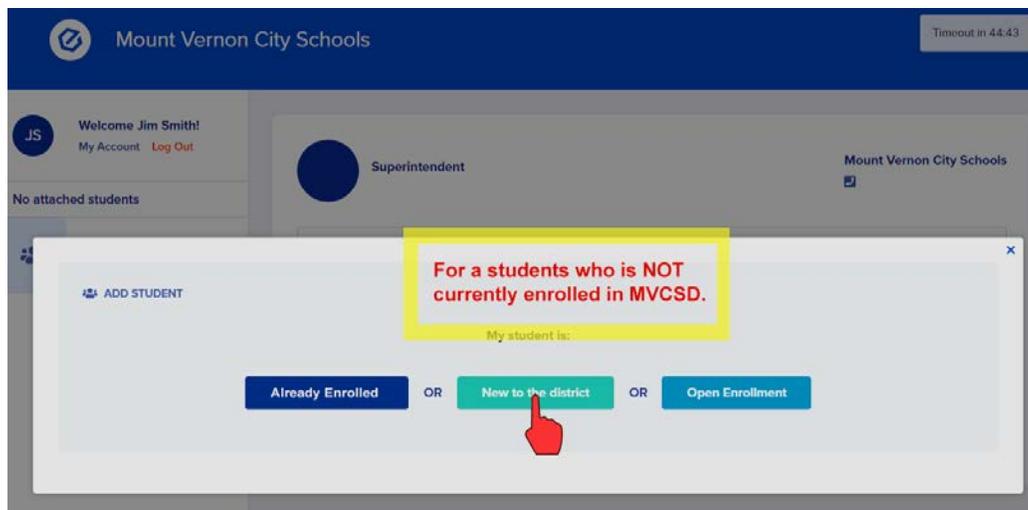
Log in with your **Login ID and Password**. If this is your first time you will need to click on **[Create Account]**.



From the parent dashboard, select **[ADD STUDENT]**.



Select **|New to the district|** for a student who is not currently enrolled in MVCSD.



Fill out all data fields for your student, then select **|Begin New Enrollment|**.

ADD STUDENT

Enroll a New Student

You may use this area to create a new online enrollment form application for a NEW student whom you would like to enroll within the Mount Vernon City Schools. Please be aware that the application process requests a great deal of information from you. You may save and return to your application many times before you officially submit it to the school district. Come back to this page to check the status of your new enrollment application and to answer any additional questions the district may require.

First Name  
Susan

Last Name  
Smith

Date of Birth  
1/9/2012

Enrolling Grade  
02

Begin New Enrollment

Completely fill out all information on the Enrollment Form. This is a 10 part enrollment form that takes approximately 30 minutes to complete.

- You may click **|Save|** (located at the top and bottom of the document) to save your information and fill out at a later time.
- When complete, be sure to click **|Save and Submit|** to submit the enrollment form to the district office.

NEW ENROLLMENT

Form Status: Not yet submitted to district

Print Save Save & Submit Clear Form

Part One: Student Information

**This is the beginning of MVCSD enrollment form.**

Student's Name

Legal Last Name Legal First Name Legal Middle Name

Smith Susan

Name prefer to be called

Other Student Info

Gender Mother's Maiden Name

Female

Date of Birth: Birthplace City:

01/09/2012

- The enrollment form contains 10 parts.
- The enrollment form takes approximately 30 minutes to complete.
- Carefully fill out each part.
- You may click **Save** and complete the form at a later time.
- When you have completed the form, click **Save & Submit** to submit the form to the district.

**Part Four and Part Five:** Data Fields in Part 4 and Part 5 are loaded into the district 'Student Information System' and are the primary way for the school system to contact you. **Please include a valid email address and current phone numbers in these sections.**

**Part Four: First Legal Guardian Details** **Fill out data fields for Part Four: First Legal Guardian.**

**Name & Relationship** **If there are two parents or if there is a second legal guardian, fill out data fields for Part Five: Second Legal Guardian.**

Prefix	First Name	Last Name
Mr.	Jim	Smith
Suffix (e.g. Jr.)	Relationship	
	Father	

**Address**

Same Address As Child?	Street Address	City
Yes	300 Newark Road	Mount Vernon
State	Zipcode	
OH	43050	

Available to Volunteer?  
Yes

**Contact** **Carefully fill out contact information. This information is loaded into the district 'Student Information System' and will be the primary way for the school to contact you.**

**NOTE:** At least 1 (one) phone # is required to submit this enrollment form.

**Please enter a valid email address.**

Email Address	Home Phone	Cell/Other Phone
jimsemail@gmail.com	740-522-8989	330-235-2323
Work Phone	Place of Work	I prefer to be reached on my
740-511-2222	Hemingway	Home Phone

After completing all ten sections, type in your name (eSignature).

Finally, click **[Save and Submit]** to have the form submitted to the district office.

**Part Ten: Electronic Signature & Authorization**

Any additional notes/information you would like the district to know about your enrollment?

Type your name in the box here to indicate your desire to register this child for school

Jim Smith **Type in your name.** eSignature Date 7/31/2019

**Click Save & Submit to submit the form to the District Office.**

Print Save **Save & Submit** CLEAR FORM

You will receive an email message that your enrollment application has been submitted to the District.