HCPSS





Howard County Public Schools © Technology Department © Document ID No: SYN177 © Revision Date: 08/10/2015



=Timesaver



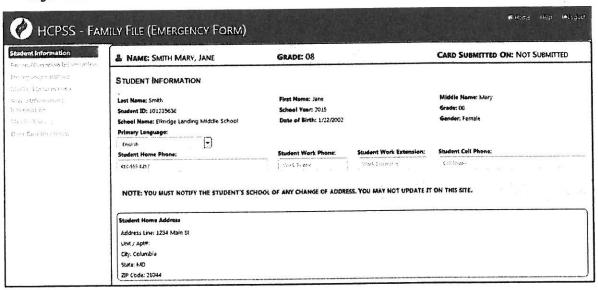
About the Family File

The Howard County Public School System (HCPSS) has implemented a new process for parents/guardians to complete emergency information. Parents/guardians must complete a Family File for each child.

NOTE: You must have a valid HCPSS Connect user name and password to access the new Family File. If you have forgotten your username and password or if you experience any issues completing the Family File, please contact your child's school.

The Family File is organized into separate pages. You must verify and/or enter information on each page. The pages are:

- Student Information: Your child's address and contact information.
- Parent/Guardian Information: Information for the child's parents or guardians.
- · Contacts: Your child's authorized contacts in case of an emergency.
- · Medical Information: Your child's health information.
- Arrival/Departure Information: Instructions for your child's method of transportation for arrival, departure, and early closing.
- Media Release: Permission to use your child's photo in print, TV, radio, online and/or via social media.
- Data Confidentiality: Permission to release your child's information to various organizations.



You will be able to save your work and finish at another time if necessary by clicking the **Save & Finish Later** button. All of the data you entered will be saved. Also, you will be able to copy the contact information you entered for one child to any remaining children in your family.

Select Child I dane

Messages

Calendar

Student Info

Family File (Emergency Form)

Course Work in CANVAS

Jane

(Family File (Emergency Form)

Elkridge Landing Middle School

Access the Family File

- 1. Launch your Internet browser, e.g., Firefox, Internet Explorer, Chrome, or Safari.
- NOTE: Make sure your browser is set to allow for pop-up windows.
- 2. In your browser's Address Bar, type www.hcpss.org/connect

TIMESAVER: You may want to bookmark this page as a favorite for future use. For security reasons, do not have the browser remember your Home WASSING

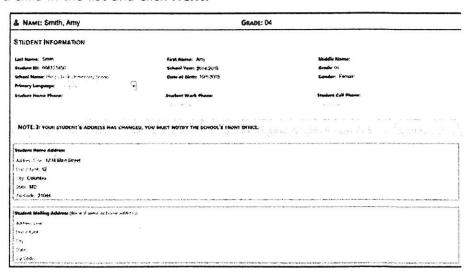
username and password.

- 3. In the Login ID field, enter your HCPSS Connect username.
- 4. In the Password field, enter your HCPSS Connect password.
- 5. Click Log in.
- 6. Click the Family File tab on in the left panel.
- 7. Click the Family File link under the child's name. The HCPSS Family File window displays.
- NOTE: If you don't have an account, follow the instructions for creating a new account on the HCPSS Connect page of the HCPSS website.

Complete the Family File

Student Information

1. Select a child in the list and click Next.

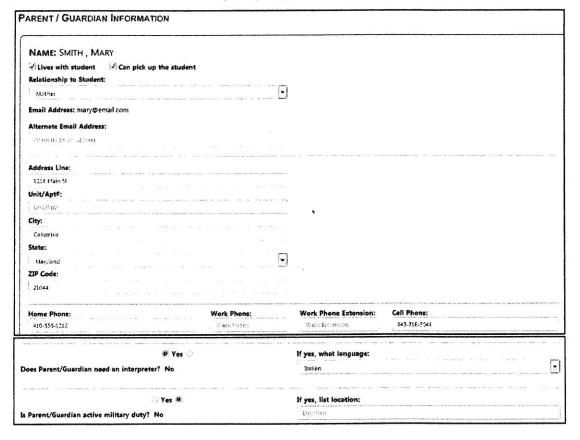


- 2. Update the child's Primary Language, Student Home Phone, Student Work Phone, and Student Cell Phone as necessary. If you do not have a land line, enter the cell phone number of the parent/guardian.
- 3. Click Next.
- NOTE: If the child's address has changed, you must notify the school front office. You will not be able to update the address here.

Parent/Guardian Information

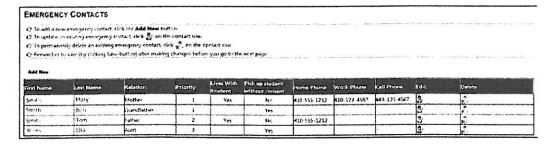
Update the information for each of the child's parents/guardians as necessary. Note that the Email Address is read-only. This is also your login ID. If you need to edit this email, please contact the school.

- · Relationship to child
- · Alternate Email Address
- Address
- · Home Phone, Cell Phone and Work Phone
- Does the Parent/Guardian need an interpreter to communicate with the teacher/school? If you select yes, please select the appropriate language.
- · Is Parent/Guardian active military duty? If you select yes, please list the location.



Emergency Contacts

Current contacts recorded for your child will display. You can edit existing contacts, add new contacts, and remove contacts. If no changes are needed, click **Next** to advance to the next page.



Add a New Contact

- 1. Click the Add New button to add a new emergency contact.
- 2. Scroll down to the Contact Details section.
- 3. Complete the contact information as requested.
- 4. Click Save in the bottom right corner of the Contact Details section.

Update a contact

- 1. Click the **Edit** icon for the contact to update. The selected contact row will highlight in yellow. The **Contact Details** section will populate with the current information.
- 2. Make the necessary edits.
- 3. Click Save in the bottom right corner of the Contact Details section.

Delete a contact

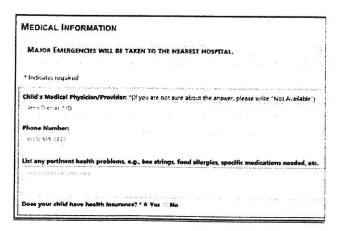
- 1. Click the **Delete** icon ** to remove a contact from the list of contacts.
- 2. Click **OK** to confirm your decision to delete.

NOTE: You will not be able to delete contact priority 1 or 2 as these priority positions are reserved for parents/guardians.

Medical Information

Enter your child's medical information:

- Child's Medical Physician/Provider this is a required field.
- · Phone Number
- List any pertinent health problems
- Does your child have health insurance? this is a required field.



8

Arrival/Departure Information

On this tab you will record your child's arrival, departure, and early closing transportation information. Select one transportation method for morning, afternoon, and unscheduled closing.

ARRIVAL / DEPAR	TURE INF	ORMATION					
Please indicate how your changes in your child's ar any regularly scheduled e	rangements, it	is your responsibility to notify the front of	and in case of an unscheduled early school closing. If there are any fice in writing. These transportation plans will also be followed on				
* Indicates required							
In the morning, my chi (select one): *	ld will be	will be In the afternoon, my child will be If there is an unscheduled early closing of s (select one): * will (select one): *					
A walker		A walker	○ Walk-home				
A car rider		A car rider	Be picked up and transported home by Picked up and transported home by				
ි In CA/Rec & Parks B	efore Care	○ In CA/Rec & Parks Before Care	Ride his/her assigned bus # Sug =				
Transported by bus	#	Transported by bus #					
aus *		Bus H					
Transported by days	are	Transported by daycare					
Name of daycare:		Name of daycare:					
Normal of Doscare	1 1100011 4 1 411 41 4-	Name of Orycan	•				
 The CA/REC & Parks The school will not be 	r, power railur Before and Aff e able to call p	e or other emergency. Make sure your chil ter Care programs will not operate when ti	500 XI 1000				
I have discussed this proc these procedures with my	edure with m	y child and he/she knows what to do in	the event of an unscheduled closing. I will periodically review				
Parent/Guardian Name: *	Mary Smith						
Date:	8/10/2015						

Type your name in the Parent/Guardian Name field before clicking Next.

Media Release

On this tab you will grant or deny permission to use your child's photo in print, TV, radio, online and/or via social media. Select this checkbox if you do not want your child photographed.

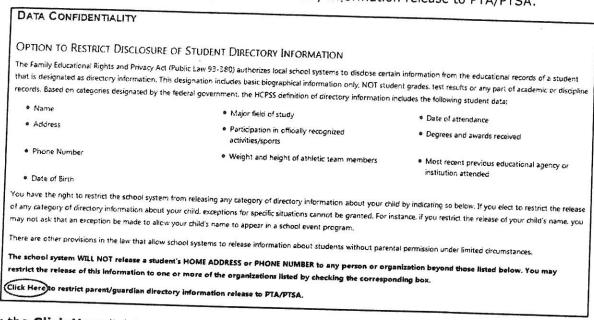
MEDIA RELEASE/INTERNET EXPOSURE

In the course of school activities, HCPSS staff and the news media occasionally photograph or videotape students and/or make public their names, likeness or school work for display/use intended for a public audience. Such exposure could occur in print, on TV, on radio, or by electronic means such as the internet or social media. Unless you exclude your child from all such exposure by opting out below, we will assume your permission to do so.

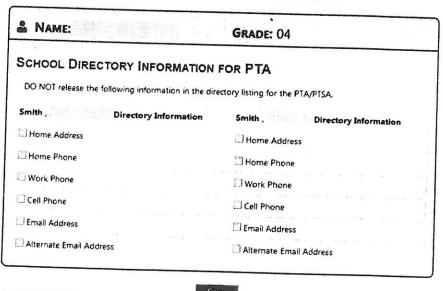
100 NOT want my child photographed, videotaped, or identified by the HCPSS or the news media for display/use intended for a public audience. I understand this release does not apply to public events, the Yearbook, and use by the Parent Teacher Association.

Data Confidentiality

On this tab you can restrict parent/guardian directory information release to PTA/PTSA.



Click the **Click Here** link to access the ability to restrict parent/guardian directory information. Select the appropriate checkboxes to restrict release and click **Save**.



You can also restrict the release of child information to various organizations. Select the various checkboxes as appropriate.

DO NOT release my child's HOME ADDRESS OR PA	ONE NUMBER to:	
and the second s		es of the school (i.e. booster dub, class reunion committee, etc.)
An organization of force of the military (i.e. Military r	ecruiters. etc.)	construction committee, etc.)
A representative of a community college in the state		
L.I A representative of the Maryland Higher Education (Cemnissien	
State and federal law permits school systems to rele information by filling in the corresponding box. DO NOT release the following category/categories of information about my child:		ou may restrict the release of one or more categories of this
Oname	anajor field of study	degrees/awards
i grade level	participation in school activities	previous educational institutions attended
Cl enrollment status	weight and/or height of athletes	are are a second
() date of birth	ates of school attendance	

Sign and Submit

Before you submit your emergency contact information, you will have the option to copy the Parent/Guardian and Emergency Contact Information to another child. You will have the ability to edit the copied information before submitting.

NOTE: Medical, Arrival/Departure Information, Media Release, and Data Confidentiality information will not be copied to the next child. You must complete this Family File for each child separately.

SIGN AND SUBMIT						
You have successfully co	empleted the emergency pro	cedure and confident	ielity information for 5	mith Jane.	***************************************	
	an and Emergency Contacts					
® Yes ○No	, , , , , , , , , , , , , , , , , , ,	another to anothe	Stodent's Family File	(Emergency Forn	1)?	
If Yes, please select a stu	ident from the below list:					
Smith , Samuel				9		
Smith , Sarah						

OTE: If you selected the sergency Contacts is cop	option to copy the Parent/ ied to the selected student	Guardian and to-		nation to another		tion from Parent/Guardian and a before you submit again.
pricable for baers with						
Odicates required					* * * · · · · · · · · · · · · · · · · ·	
	Mary 5m4h					*
ent/Guardian Name: *	and the second section of the second					,
Indicates required eent/Guardian Name: * te:	Mary 5m4h					*

Click Submit to complete the Family File and submit the information.

NOTE: If you experience any issues completing the Family File information, please contact your child's school.