

OSCEOLA COUNTY CHOICE SCHOOLS ONLINE APPLICATION GUIDE

THE SCHOOL DISTRICT OF OSCEOLA COUNTY, FLORIDA CONTRACTOR OF OSCEOLA COUNTY, FLORIDA CONTRACTO

CHOICE SCHOOLS

As a Choice district, The School District of Osceola County offers innovative choice programs from KG through Grade 12. Our goal is to promote educational choices focused on the student's interests, unique talents, and abilities. Students are encouraged to apply year-round to the school that will best meet their needs.

Families can apply by visiting, <u>www.myosceolachoice.school</u> or <u>www.osceolaschools.net/choice.</u>

Quick Guide on How to Apply

<u>IMPORTANT</u>: Have all legal documents such as the student's birth certificate and your picture ID easily accessible.

- Read the instructions carefully and allow enough time to complete the application.
- Write down your login information.
- Complete all 12 pages, including the certification and signature pages.
- You'll receive an email to confirm the successful completion of the parent portal account.
- After creating your account, complete the Choice application by accessing the parent portal.
- Verify all the contact information at the top of the Choice application.
- Select your priority and upload supporting documentation, if applicable.
- Select up to two (2) Choice schools and programs.
- Failure to meet any requirements may result in removal from the selection process.

Welcome to the Osceola County Schools - Focus Parent Portal Registration.

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The Focus Parent Portal is a tool designed to enhance communication and involvement for you in your child's education.

This portal will allow you to monitor your child's progress in school by providing timely access to both assignments and grades that are entered by the teacher throughout the grading period. This communication tool will improve your ability to assist your child and to communicate with the teacher if necessary.

After creating your Parent Portal account, you have two options to choose from:

- Add a child who is already enrolled in a district or charter school.
 - You must visit your child's school to obtain your enrolled child's student ID number and PIN. You will need to take your valid government-issued picture ID for verification purposes.
- Apply for enrollment for a new child who is currently not enrolled in a district or charter school.
 - You will need to complete the district's **Online Enrollment Application** and then visit your child's home-zone school to complete the application process. Please click the button below to search for your child's home-zone school.



Click one of the buttons below to start the process.





Parent/Guardian First Name:	(Required)
Parent/Guardian Last Name:	(Required)
Email Address:	(Required)
Create Password:	(Minimum 8 characters)
Retype Password:	(Required)
l'm n	ot a robot
Fill out the and cl	required fields ick <i>Submit</i> .

Students

You do not have any linked students at this time.

I DO NOT have a Parent Portal account and would like to create one

I have a Parent Portal account and would like to ADD A CHILD

I have Forgotten My Password and would like to generate a new one

If you already have a Parent Portal but need to <u>add a child,</u> click the middle option. Find your student's home-zone school by clicking the option that says "Find Home-Zone School".



Then, enter your address into the *Bus Planner Web* and click submit to find out your home-zone school.





Apply for Enrollment School District of Osceola County

Return to the Parent Portal Registration

Application for New Students		Continue	Application	
All fields marked with an asterisk (*) are req	uired.		
Student's First Name*				
Student's Last Name*				
Student's Birthdate*				
Language*	English	[EN]	~	
Form Type*	New En	rollment App	~	
Begi	n Applica			

Fill out the required fields and click *Begin Application*.



New Student Enrollment Test, Choice Page 1 / 11

The School District of Osceola County Online Application

Directions:

- To complete the online application, you will be required to upload:
 - 1. An image of the enrolling parent's government issued photo ID
 - 2. The student's birth certificate
 - 3. Proof of residency
 - 4. Immunization Records
 - 5. Medical Exam (Physical) Records
- This form is for parents with students not currently enrolled in an Osceola County School and will take approximately 20 minutes to complete.
- Required fields are marked with a red asterisk (*). You will not be able to continue to the next
 page until the required fields are complete.
- Navigation buttons are at the bottom of each page. Use the "Next Page" button to continue to the next section and use the "Previous Page" to return to the previous section of the application.
- Use the "Save and Continue Later" button to save your progress so you can return and complete the application at a later time. When you return to the application, use the "Existing or Returning Student/Saved Application" tab on the application login page. Enter the username and password you used to create the application to return to your saved application.

Please contact 407.870.4891 if you need assistance.



Complete all <u>11 pages</u>.



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New Student Enrollment

Test, Choice

Basic Student Information:

Enter the following information as shown on the student's birth certificate.

First Name*	Choice
Middle Name	
Last Name*	Test
Gender*	N/A
Date of Birth*	September v 1 v 2014 v
Birth City*	
Birth State*	N/A
Birth Country*	United States [US]
Grade level to enroll your student.*	N/A V
Upload your child's Birth Certificate*	No Files
	Previous Page Next Page Save and Continue Later

Fill out the required fields, upload your child's birth certificate and click *Next Page*.



New Student Enrollment

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Test, Choice

iving Situation	
Select all that apply living with (the student.*	
If other, provide details.	
Has the student, parent or another person in the home obtained or sought work in the processing of fruits/vegetables, dairy products, livestock, poultry, plant nurseries, greenhouses, forestry or fishing within the past 3 years?*	No
Is the student's address a temporary living arrangement?	
N/A	▼
Is this temporary living arrangement due to loss of housing or economic hardship?	N/A
Is the student unaccompanied or not living with the parent or legal guardian?	
N/A	

Fill out the required fields.

				••••
esidency:				
Has the student ever attende a Florida School (not in Osceola)?	ed N/A			
Has the student ever attended an Osceola Scho	ol?			
Name of last school attended	d.			
When was this school last attended?	N/A	✓ N/A ✓ N/A	~	
Was the last school the student attended public or private?	N/A 🔽)		
Address of Last School Attended				
]
Proof of Residency				
A resident parent or guardiar from each of the following ca	n enrolling a student ategories:	t in an Osceola Cour	nty School shall produce o	ne document
Category 1		Category 2		
Mortgage document		Current utility b	ll <mark>(</mark> electric, internet, wate	r)
Executed rental or lease agr	reement	Income tax reco	rds	
Property tax records		Proof of receipt	of government benefits	
website.	ient enrollment req	uirements may be r	eferenced on the <u>Student</u>	Services
A Parent or Guardian without complete a Verification of Ad	t a lease or living wi Idress at the school:	th another person r	nust provide one of the fo	llowing and
 Driver's License ar Government Bene Auto Registration 	nd/or state ID showing fits showing the correct of showing the corre	g the correct current ect current address current address	address	
For more information, please	call Student Service	es at 407-870-4897		
Upload the proof of	No F	iles		
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887	
f you are applying for enrolling	School: ment at another school other the student's zoned school, you will have an poice options at the end of this application
Primary Address County*	N/A
Address Information	
Physical Address*	
Apt/Unit Number	
If prompted above, select t automatically complete the	the "Address Suggestion" to identify your student's zoned school and to e city, state and zip code below.
primary address.*	
These fields will automatic	ally complete when selecting the "Address Suggestion" above.
City	
State	
State	
Zip Code	
Zip Code +4 Zip Code	
Zip Code +4 Zip Code Mailing Address	
Zip Code +4 Zip Code Mailing Address Is this the student's mailir address?	ng 🗹
Zip Code +4 Zip Code Mailing Address Is this the student's mailir address? Phone Number	ng 🔽
Zip Code +4 Zip Code Mailing Address Is this the student's mailin address? Phone Number Primary Phone Number*	ng
Zip Code +4 Zip Code Mailing Address Is this the student's mailin address? Phone Number Primary Phone Number*	ng

Next Page.

New Student Enrollment

Test, Choice

Medical Information Immunization Requirements

Do you have immunization and/or physical examination documentation?*



List of Available Health Services Available to Our Students

- Scoliosis Screenings
- Growth and development, including body mass index (BMI), screenings
- Preventive dental services
- Minor health care from school nurse when needed (minor cuts and scrapes)
- Mental health counseling
- Life skills counseling
- Wellness surveys
- Board Certified Behavior Analyst observation
- School Psychologist observation

Fill out the required fields and click *Next Page*.

Separate parent/guardian authorizations will be required for the school clinic staff or school staff to administer daily or as-needed prescribed or over-the-counter medications, conduct medical procedures or provide medical treatment. Additional healthcare services may be available to individual students based on identified need. These services require separate parent consent.

Please contact your school if you would like information about: Immunization clinics

Eye exams (follow-up to vision screenings)

Emotional and Mental Health Counseling-individual and small groups

In the event of an EMERGENCY, the school will access the 911 emergency medical system. The school will contact the parents/emergency contact as soon as possible. When necessary, emergency health services such as first aid, cardiopulmonary resuscitation (CPR), or use of an automated external defibrillator (AED) may be utilized until emergency services arrive on campus. To expedite care, school personnel may provide medical information to the responding emergency team to initiate treatment and transport to an appropriate facility.

Florida Statute Chapter 394, Section 4784 (2) states that "when any minor age 13 years or older experiences an emotional crisis to such degree that he or she perceives the need for professional assistance, he or she shall have the right to request, consent to, and receive outpatient crisis intervention services including individual psychotherapy, group therapy, counseling, or other forms of verbal therapy provided by a licensed mental health professional. Such services shall not exceed two visits during any 1-week period in response to a crisis situation before parental consent is required for further services".

The Code of Student Conduct applies to ALL students attending a School District of Osceola campus and will be implemented in accordance with the terms contained therein, regardless of options elected above as a condition of attendance.

Do you prefer that your child NOT participate in one or more of the above listed services.*





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THE SCHOOL DO	NET OF OSCARDANCE Apply New Stud Test, Choi	r for Enrollment ent Enrollment ice	Page 6 / 11
	Additional Student Informatio	on:	
	Former/Other names(s) student has used.		
	Social Security Number		
	What is your child's race?		
	American Indian or Alaska Native*	No	
	Asian*	No	
	Black or African American*	No	
	Native Hawaiian or other Pacific Islander*	No	
	White*	No	
		Previous Page Next Page Save and Continue Later	

Fill out the required fields and click *Next Page*.



New Student Enrollment

Test, Choice

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Additional Student Information (continued):
Is the student a child of a military family?*
Has the student been in any of the following programs?
Does the student have any physical disabilities?*
Does the student have an Individual Education Plan (IEP)?
If you have it, upload the student's IEP plan here:
Does your student have a 504 Yes accommodation plan?
If you have it, upload the student's 504 plan here:
Has the student been referred for mental health services?
Previous Page Next Page Save and Continue Later

Fill out the required fields and click *Next Page*. If you selected *Yes* to either IEP or 504, upload the documentation.



Fill out the required fields and click Next Page.

RICT OF OB		
Control to the second s	Apply for Enrollment New Student Enrollment Test, Choice	Page 10 / 11
You as the enrolling Upload Enrolling Picture ID*	g parent are required to upload an image of your government i Parent No Files	issued picture ID.
Do you have any documents regar	court ding custody?	
Contact Informati Enter your contact	on: information below	
In addtion to your o and assume respor	contact information, enter four addtional emergency contacts nsibility for your student if you or another parent cannot be rea	authorized to pick-up ached.
	+ Add New Contact	
	Previous Page Next Page Save and Continue Later	

Upload the enrolling parent's ID and any other documents if applicable. Then, click *Next Page*.

Apply New Stud Test, Choi	for Enrollment ent Enrollment ce
Certification Statement: I certify that all information giver	n in this application is true and accurate to the best of my knowledge.
Check to acknowledge the above certification statement	
Enrolling Parent*	
To authenticate your signature password.	, you will be asked to enter your parent portal username (email) and
Enrolling Parent Signature*	Click to Sign
Signature Date*	September • 27 • 2023 •
Media Preferences	
Library Access Options: Select the Libary access option t Center. Library Access Options	hat you wish your child to have when checking out books in the Media.
N/A	- jun
Q Filter	
N/A Option 1: Unlimited Access: M	Full Access to Check Out Books in the Media Center.
W Option 2. Limited Access. Ma	ay Check Out Dooks in the Media Center, but not Mature Content.

(r Option 3: No Access: Student is not Permitted to Check Books Out of the Media Center.

photographs, and video and/or voice records

Provide the enrolling parent's name and signature. Then, select the library access option.

Media Usage Permission:

Osceola District Schools strives to celebrate the accomplishments of its students by sharing information with the community. To do this, Osceola School District may submit press releases to local media (newspapers, radio, television, online new blogs) that include student names, student work, student photographs, and video and/or voice records.

In addition, Osceola School District may choose to publish and/or display this information in Districtsponsored publication, at various school or public functions, on the Osceola School District school channel, website(s), and various social media, or in the school yearbook. While the intent of this practice is to be informative and celebratory, Osceola School District recognizes that concerns may arise regarding a student's right to privacy and complies with the Federal Family Educational Rights and Privacy Act (FERPA).

Photo permission*	Yes
√ideo permission*	Yes

Directory Information Permission:

Directory Information consists of the following student data:

Name; address; telephone number (if listed); participation in officially recognized activities and sports; weight and height (if an athletic team member); the name of the most recent previous school or program attended; dates of the attendance at an Osceola District School and degrees and honors received; date and place of birth.

Publish directory information* Yes

Click the Submit and Finish Application button below to submit your application.

If you plan to apply for enrollment at another school other the student's zoned school you must still submit this application. Additional choice applicant instuctions will be provided on the next screen.

Previous Page
Submit and Finish

Answer the questions and click Submit and Finish.



New Student Enrollment

Test, Choice

Please check your email inbox! You should receive your confirmation email including instructions on how to log into the Focus Portal. If you don't see the email, please check your SPAM or JUNK folder. If you have questions, please contact 407.870.4891 or email Student Services at ssrvregistration@osceolaschools.net.

Zoned School: Lakeview Elementary - 0801

ATTENTION CHOICE APPLICANTS:

To apply for Choice:

- 1. Click the button "I am finished adding students. Please take me to the portal."
- 2. Then, click on the "School Choice Application" link under your child's name in your parent portal.

Please contact the Educational Choices and Innovation Department at 407-870-4847 or choiceprogramapplication@osceolaschools.net, if you have any questions regarding the school Choice process.

Return to the Parent Portal Registration

Check your email for your confirmation and instructions.



Just a few more steps in your newly created Parent Portal.



If you don't need to add or apply for enrollment for another child, click *I am finished adding students*. *Please take me to the Portal*.

If you need to add a child or apply for enrollment, click the appropriate box and follow the steps provided.

Parent Portal:

) P	ortal 0	Help			
Portal School I	nformation	*	Portal			
My Prof	ile	0	School In	formation		
Calenda	ir	4	My Profile			
Forms		۰	Preferen	ces		
View Printed Report Cards Grade Changes	Child Info Class Schedule Test History Attendance School Choice	***	Calendar			
Grades Absences Referrals School Choice			Forms		<	
		Q	Test		~	
		View Repo	Printed rt Cards	Child Info		
		Grade	e Changes	Class Schedule		
Forms Test Vew Printed Report Cards Grade Charges Class Schedul Grades Referals School Choice Application 2022	Abser	nces	Attendance			
		Refer	rals	School Choice		
		School Choice Application 2022				

To apply for Choice, click your child's name on the left hand side, then select *School Choice Application* (school year).

Choice Application:

(Schoo	I Choice Application 2022	🛛 Help										
PortalSchool Information	n	Welcome to the Choice Application for the 2022-2023 School Year!											
 My Profile Preferences 	e			2	Student ID 5082278		Currer	t Grade	Entering Grade 2022-2023 KG		Home Address 123 test rd		
Calendar	<		Parent/Guardian Name osceola county				Home Phone 1231231234	Current School Applicants		Current Choice Program None		City kissimmee	Zip Code 34744
Test	~		Parent Email osceolaschooltest@gmail.com				Work Phone 1231231234	Zoned N/A	School	Gifted		ESE Status None	Birth Date 2017-01-01
View Printed Child Inf Report Cards Grade Changes Class Sci Grades Test Hist	o nedule tory	Please note that this data can only be changed at the school where the student is currently enrolled. Proof of address must be presented to change the address.											
dalaan Katandana Aaanaa Sobol Obala Referrais Sobol Obala Application 2022			Active Military? Applicants will be assigned through a lottery selection process. Priority will be granted to dependent children of active dury military presome Wrobe move resulted from military orders. Documentation is required. SDOC Employee? Applicants will be assigned through a lottery selection process. Priority will be granted to children whose parent works for The Schoel District of Osceola County. Choose Programs You may make up to 2 Program choices. Select programs fit decisions.				Circumstance A? Its will be assigned through a lottery seld "Poorby will be granted to oblidise who ho costeld due to foster care placement in a school zone. Documentation is required "mployee ID Number?" "monose and the school District of Or please enter your employee number. 2), with (1) being your most desired prog	ction have	Special Circumstance B? Applicants will be assigned through a lottery selection process. Priority will be prioride to children who move due to a court- ordered change in custody due to separation, diverse, or the servicus illness or death of a outstodial parent. Documentation is required. SDOC Employee School/ Department? If you are currently a SDOC employee, please fill out the name of you're selected your choice(s), make sure to click Eave at the bottom		New Student? Applicants will be assigned through a lottery selection process. Priority will be granted to two market in district. Please select this box if your chick has rever been enrolled in Onceale Durind sched buty our currently residue with Osceola county. Please with the School Osceola County <u>Residence Policy & Guardianship Guidines</u> for additional information. SDOC Employee Position? If you are currently a SOOC employee, please provide your current position.		
			Choice	Title	School	Progra	Program Description & Additional Requirements					Prior	
		Choice for Capacity Charler Academy K-8 - 0022					Choice for Capacity is offered if there are seats available beyond the offered Choice programs at a school. If you are not interested in a Choice program, you may select Choice for Capacity.						

Select your Choice school and programs and click *Save* to submit your Choice application.

Check Your Status

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A Portal		1									
School Informatio	on		Export A and Filter: OFF								
Av Brofile			School Year 🛊		Choice 🛔	Applying Program 🛊	Status 🛓	Арр			
 My Frome 			2022-23		1	Canoe Creek K8 - 0991 - Choice for Capacity	Waiting	KG			
Preferences		2022-23		2	Cypress Elementary - 0851 - Choice for Capacity	Waiting	KG				
🛗 Calendar											
Forms		<									
Test	N P	Portal		ľ							
Report Cards Grade Changes Clas:	s s	chool	Information								
Grades Test Absences Atte	N	4y Pro	file								
School Choice	Þ P	refere	ences								
Ê	1 c	Calend	ar								
	b F	Forms		<							
		Test		~							
V R	'iew Prii Jeport C	nted Cards	Child Info								
G	irade Cl	hanges	Class Schedule								
G	irades	-	Test History								
R	eferrals	5	School Choice								
SI	chool C pplicati	hoice ion 2022		$\mathbf{\cdot}$	-						
				7	5						

Log in to your parent portal
 Click your child's name on the left hand side.
 Click School Choice
 View the statue

4. View the status