

Parent Data Confirmation Tutorial

***Please note that your device may or may not look exactly like the device used in this tutorial. As such, the steps required may vary.*

- If you have not already, please see the Parent Data Confirmation Information document located here: <https://www.kermanusd.com/domain/137>

1. Login to the Aeries Parent Portal located at: <https://aeries.kermanusd.com/parent>
2. You should be immediately prompted to complete data confirmation before accessing other areas of the portal. Please note, if you have multiple children attending school, you will need to complete this process for each student separately.
3. The Data Confirmation process starts with a short Family Information Survey. Please select the options that apply to you and your family. After completing this section, please click Confirm and Continue.

The screenshot shows a survey interface with the following elements:

- At the top left, it says "Last Confirmed: 7/11/2018 10:01:06 AM" in red text.
- The main question is "Please select whether or not at least one parent/guardian of this student is active in the United States Armed Forces:".
- There are two radio button options:
 - The first option is "Yes, at least one parent/guardian of this student is active in the United States Armed Forces." and is currently unselected.
 - The second option is "No, this student does not have a parent/guardian who is active in the United States Armed Forces." and is selected, with a green highlight around the entire option box.
- Below this, there is another question: "Please select one of the following options to complete the residence survey:".
- There is one visible radio button option: "Temporary Shelters" with the subtext "A temporary residence provided for homeless individuals who would otherwise...".

4. Step 2 will ask you to confirm some basic. Please note that changes to the Mailing Address will not be made immediately. Instead, a notification will be sent to the School Site who will update this information for you. If you made changes to this section, please click Save before clicking Confirm and Continue.

Student Demographics		
Notes		
Parent/Guardian	Samuel/Jillian Tester	This field is used to address mailings from the school if applicable.
Mailing Address	12345 Fake Blvd Kerman CA 93630	Changes to this information will NOT be saved in the system. Instead, the new information will be emailed to the school and the school will contact you for additional information.
Primary Phone	(555) 555-5555	
Father's Work		
Mother's Work		

5. In Step 3, you will be able to add and update your Emergency Contacts. After each contact you add or edit, please scroll down and click the Save button. After completing this section, please click Confirm and Continue.

Select Record to Change

Name	Address	Relation
Fake Family	123 Fake Family Street	Aunt
Fake Grandma	127 Fake Family Street	Grandmother
Fake Uncle	123457 Fake Family Blvd	Uncle

Change Add Delete

Contact Details		
Notes		
Name	Fake Family	This field is used to address mailings from the school if applicable.
Name Prefix		

6. Step 4 will ask you to update any Medical Conditions associated with your child. Please note that you will be required to bring the school site medical documentation for any condition you select. The top portion of this section, titled Medical History and Current Medical Conditions, represents medical conditions that are currently on file with the school site. The second section at the bottom represents the area where you can add additional conditions for your child. After modifying each section, please look at the bottom of the section and select Save before continuing. After completing this section, please click Confirm and Continue.

Medical History and Current Medical Conditions					
Condition	Effective Date	Age	Grade	Comment	
Allergy - Seasonal	06/12/2007	11	7		No Longer Applies
Attention Deficit Disorder	07/11/2018	0	0		No Longer Applies
Save					
Additional Conditions Please Check All That Apply					
<input type="checkbox"/> Hyperactivity Disorder - ADHD	<input type="checkbox"/> Enuresis			<input type="checkbox"/> Neurological Condition	
<input type="checkbox"/> Assistive Device Used	<input type="checkbox"/> Epilepsy			<input type="checkbox"/> Neurofibromatosis	
<input type="checkbox"/> Affective Disorder	<input checked="" type="checkbox"/> Epi-Pen			<input type="checkbox"/> Ophthalmic Condition	
<div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> Effective Date: 07/13/2018 Age: 0 Grade: 0 Comment: </div>					
<input checked="" type="checkbox"/> Allergy - Bee	<input type="checkbox"/> Fracture			<input type="checkbox"/> Organ Transplant	
Effective Date: 07/13/2018					

7. In Step 5, you will be able to fill out a variety of required forms. Read each section carefully and review any attached documentation. Please note that if a section only contains an answer of "Yes", the section and attached documentation are for your information only and your response of "Yes" is the acknowledgement that you have received the information.

Authorizations and Prohibitions	
Description	Status
Acceptable Use Agreement <u>Acceptable Use Agreement (Students)</u> Click Here for Form 4520. As the parent/guardian of the student, I have read, understand, and agree that my child shall comply with the terms of the Acceptable Use Agreement. Further, I accept full responsibility for supervision of my child's use of his/her access account if and when such access is not in the school setting. By selecting YES: I agree to the terms set forth in the Acceptable Use Agreement and Release of District From Liability form. By selecting NO: I <u>do not</u> agree to the terms set forth in the Acceptable Use Agreement and Release of District From Liability form.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Notification of Balancing Enrollment Informational <u>Notification to Parents Regarding Balancing Enrollment</u> Click Here for this informational form. Due to the date and time of my child's enrollment, there is the possibility that my child could be moved to another class. It is also a possibility that my child could be transferred to another elementary school in the district.	<input checked="" type="checkbox"/> Yes
Authorization to Disclose Confidential Information <u>Authorization to Disclose Confidential Information within Kerman Unified School District</u> Click Here for Form 4601. During the course of your student's enrollment in the Kerman Unified School District ("District"), it may be necessary that medical, academic or other confidential information regarding your child be shared with	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

8. Step 6 is the final step which is a reminder to double check and ensure that each section is filled in accurately and completely. Also, please review any information contained on this page. Once you are satisfied, please click the Submit Final Confirmation button. This will confirm your Data for the upcoming school year. Please note that you may be required to fill out more information at your child's school site at a later date.