

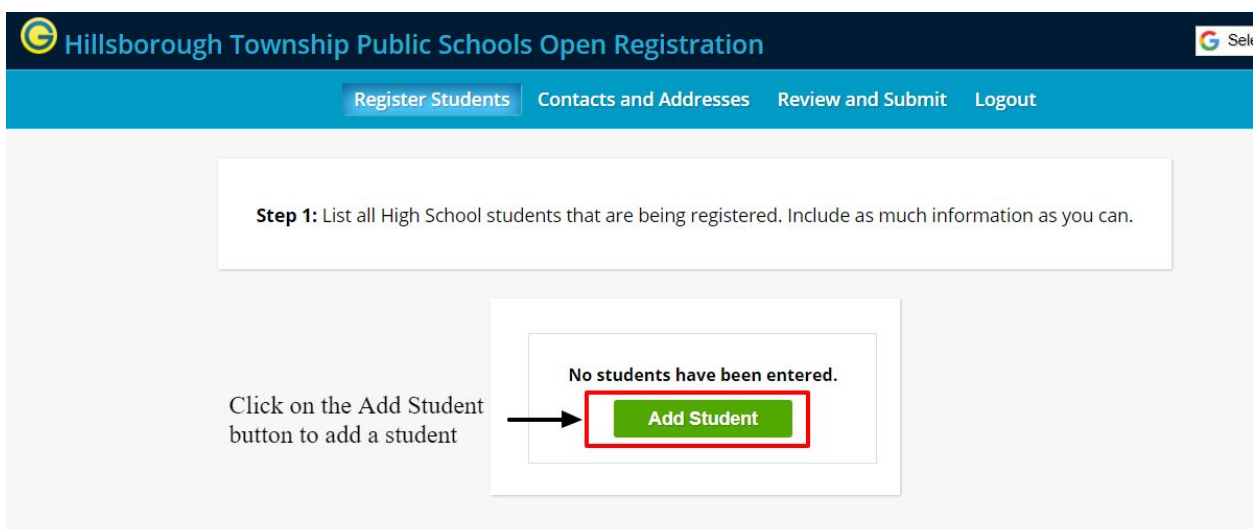
Hillsborough Township Public Schools

OPEN REGISTRATION PORTAL INSTRUCTIONS 2017-18

- This registration portal (<https://genesis.https.us/genesis/openReg>) is used to collect basic information about your child before you come to the school in person to register. Please fill out all information requested. By filling out all information you will save time when you meet with the registrar. **Be sure to include at least 1 emergency contact and your child's doctor.**
- Click on the requested image to start the process (the security question will change according to images).



The screenshot shows the top navigation bar with the Hillsborough Township Public Schools logo and the text "Hillsborough Township Public Schools Open Registration". To the right is a "Select Language" dropdown menu. The main content area features a white box with the heading "Welcome to Open Registration". Below the heading is a 3x4 grid of 12 icons: a yellow school bus, a CD, a green teacup on a saucer, a brown kitten, a silver padlock, a black and white panda, a red pencil, a planet Saturn, a black and white dog, a schoolhouse, a soccer ball, and a yellow tennis ball. Below the grid, the text reads: "For security purposes; please click on the **Pencil** to get started."



The screenshot shows the top navigation bar with the Hillsborough Township Public Schools logo and the text "Hillsborough Township Public Schools Open Registration". To the right is a "Select Language" dropdown menu. Below the navigation bar is a blue bar with the following links: "Register Students", "Contacts and Addresses", "Review and Submit", and "Logout". The main content area features a white box with the heading "Step 1: List all High School students that are being registered. Include as much information as you can." Below this is a white box containing the text "No students have been entered." and a green "Add Student" button. An arrow points from the text "Click on the Add Student button to add a student" to the "Add Student" button.

The screen below will then be displayed on your computer

Add Student

FILL OUT THIS FORM AND THEN HIT THE 'SAVE STUDENT' BUTTON

| | |
|--|--|
| Registering for School Year: | 2017-18 |
| Anticipated Grade Level: | |
| Student First Name: | |
| Middle Name: | |
| Student Last Name: | Suffix: |
| Ethnicity: | <input type="checkbox"/> Hispanic |
| | <input type="checkbox"/> White |
| | <input type="checkbox"/> Black |
| Select one or more: | <input type="checkbox"/> American Indian / Alaskan |
| | <input type="checkbox"/> Asian |
| | <input type="checkbox"/> Hawaiian native/other Pacific Islander |
| Gender: | |
| Municipality: | HILLSBOROUGH TOWNSHIP |
| Date of Birth: | |
| Refuse release of birthplace information: | <input type="checkbox"/> |
| City of Birth: | |
| State of Birth: | |
| Country of Birth: | |
| Birth Certificate / Record number: | |
| Date First Enrolled in US School (if born outside the US): | |
| Primary Language spoken by student: | |
| Language spoken by family at home: | |
| Military Connected Indicator: | <input type="radio"/> Not Military Connected - Student is not military-connected <input type="radio"/> Active Duty - dependent of a member of the Active Duty Forces (Full Time: Army Navy Air Force Marine Corps or Coast Guard) |
| Insurance Provider: | |
| Has Med Insurance?: | <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Unknown |
| Release to NJ Family Care: | <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Unknown |

Save Student Cancel

- Please enter all information using upper and lower case.
- Choose the **Grade level** your child will be attending when they enroll.
- Enter your child's legal **first name** as it appears on the birth certificate.
- Enter your child's legal **middle name** as it appears on the birth certificate.
- Enter your child's legal **last name** as it appears on the birth certificate.
- Enter any **Suffix** such as Jr., Sr., II, III, IV, etc.
- Choose your child's **ethnicity and race**. You can choose more than one category.
- Choose your child's **Gender**.
- **Municipality** defaults to Hillsborough, but can be changed to Millstone if applicable.
- Enter your child's **date of birth**. Format is MM/DD/YYYY if not using the calendar
- Enter your child's **city of birth** if they were born in the United States.
- Enter your child's **state of birth** if they were born in the United States. NJ is the first item in the drop down list.
- Enter the **Country** your child was born in. United States is the first item in the dropdown list.
- Enter the **Birth certificate number** if it's available.
- Enter Date **first enrolled in a US School** if applicable.
- Choose the **language spoken by your child**. English is the first item in the drop down.
- Choose the **language spoken by family members at home**. English is the first item in the drop down.

- Enter **Military Connected Indicator**.
- Enter **Insurance** Information.
- Click the **Add Student** button after checking your information.
- Another entry screen will now be displayed. If you have another student you wish to enter fill out all of the information for that child and click the **Add Another Student** button.
- If you have no additional students, click the **Advance to Next Screen** button to continue.

Hillsborough Township Public Schools Open Registration

Select Language

Register Students | Contacts and Addresses | Review and Submit | Logout

Step 1: List all High School students that are being registered. Include as much information as you can.

| STUDENTS WHO YOU HAVE ENTERED | | | | | | |
|-------------------------------|-------|--------|----------|-----|--------------------------------|--------------------------------|
| LAST | FIRST | MIDDLE | DOB | AGE | | |
| 1. Student | TEst | | 9/1/2010 | 7 | Modify Student | Remove Student |

[Add Another Student](#)

If you have entered all of your students, then click the 'Next Screen' button below

[Advance to Next Screen](#)

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You will now be asked to enter the home address, along with information for the first guardian.

SECTION 1: **ADD THE STUDENT'S PRIMARY ADDRESS**

House #

Street Name

Apt #

City

State

Zip

County

SECTION 2: **GUARDIAN AT PRIMARY ADDRESS**

First Name Last Name

Relationship to Student

Home Phone Primary

Cell Primary

Cell Provider


Work Primary

Primary Email

SECTION 3: [Click here to add another Guardian](#)

[Advance to Next Screen](#)

- Enter the guardian's house number.
- Enter the guardian's street.
- Enter any apartment number.
- City is defaulted to Hillsborough.
- State is defaulted to NJ.
- Zip Code is defaulted to 08844.
- County is defaulted to Somerset.
- Enter the guardians Prefix i.e. Mr. Mrs., Ms., Miss, Dr.
- Enter the guardian's first and last name.
- Choose the guardian's relationship to Student (mother, father, etc).
- Enter the guardian's home, work, and cell numbers including cell provider.
- Enter the guardian's Primary Email address. This email will be also be used to set up your parent portal access account.
- Click the box in SECTION 3 **Click here to add another Guardian** to add the second guardian's information if one exists.
- You will then be prompted for the information for the second guardian.

| | |
|---|--|
| SECTION 3:  ENTER ADDITIONAL GUARDIANS FOR STUDENT Close | |
| Does this Guardian live at student's Primary Address? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| House # | <input type="text"/> |
| Street Name | <input type="text"/> |
| Apt # | <input type="text"/> |
| City | <input type="text"/> State <input type="text" value="NJ"/> , Zip <input type="text" value="08844"/> County <input type="text" value="Somerset"/> |
| First Name | <input type="text"/> Last Name <input type="text"/> |
| Relationship to Student | <input type="text"/> |
| Home Phone | <input type="text"/> <input type="checkbox"/> Primary Number |
| Primary Email | <input type="text"/> |
| SECTION 4: | Click here to add another Guardian |

[Advance to Next Screen](#)

If the guardian does **not** live in the same house with the child click **NO** to the question, "Does this Guardian live at student's primary address?"

- Fill out all the information requested.
- click the **Advance to Next Screen** button.
- The screen will now display all of the guardians you have entered. You have the ability to make any corrections if you entered something wrong.
- You will now be asked to enter at **least one emergency contact** along with the **child's doctor**. You can enter as many emergency contacts as you like.

- Click Add another contact as noted below to continue.

Register Students **Contacts and Addresses** Review and Submit Logout

Step 3: Review the Guardians that you have entered and add any other contacts you would like to include.

| | |
|--|--------------|
| 1. MARY ADAMS , GUARDIAN Edit | |
| Relationship: | Mother |
| Home Phone: | 111-111-1111 |

Click on the 'Edit' button to Edit a Contact or Add an Address OR Click '[Add Another Contact](#)' to add more contacts.

| | |
|--|--------------------------------|
| 1. MRS. MARY SMITH , GUARDIAN Edit | |
| Relationship: | Mother |
| Home Phone: | 111-111-1111 |
| Cell Phone: | 222-222-2222 Provider: VERIZON |
| Work Phone: | 333-333-3333 |
| Email: | Mary@verizon.net |
| ADDRESS INFORMATION 1 Change Remove | |
| 123 First Street | |
| Montville, NJ 07849 | |
| 2. MR. JOHN SMITH , EMERGENCY Edit | |
| Relationship: | Father |
| Home Phone: | 111-111-1111 |
| Cell Phone: | 777-777-7777 Provider: VERIZON |
| Work Phone: | 888-888-8888 |
| Email: | john@verizon.net |
| NO ADDRESS INFORMATION | |

WHICH OF THE OPTIONS BELOW BEST DESCRIBE WHO THIS PERSON IS?

Emergency Contact (ie. friend, grandparent) you would like us to contact in an emergency

Guardian for this student

Other type of contact for informational purposes (ie. doctor, dentist)

ADD CONTACT INFORMATION

First Name:

Last Name:

Relationship to Student:

Home Phone:

Cell Phone: Provider:

Work Phone:

Primary Email:

Do you need to add an address to this person? Yes No

[Save Contact Information](#)

[Add Another Contact](#)
[Advance to Next Screen](#)

- Choose Emergency contact to enter any other contacts you would like to have on file for the school to call in an emergency.

At least one emergency contact is required.

- Enter the contact's first and last name.
- Choose what the relationship the contact is to the child.
- Enter at least one phone number for the contact in the appropriate place. You can enter more than one phone number. If using a cell phone be sure to include the cell provider.

- An email address and home address is not required.
- Click the **Save Contact Information** button.
- You can enter as many emergency contacts as you wish by clicking the **Add Another Contact** button.
- After you enter your emergency contacts you must enter your child's doctor's name and phone number.

- Click the **Add Another Contact** button.
- Choose a contact type of other.
- Choose Dr. as the prefix.
- Enter your doctors first and last name.
- Choose a relationship type of Doctor.
- Enter the Doctors phone number under Home Phone.
- Click the **Save Contact Information** button.
- Click the **Advance to Next Screen** button.
- Review all of the information you have entered and make any corrections.
- At the bottom of the screen you have the ability to enter your email address to get a confirmation email.
- Click on the **Submit Registration Information** button.
- This completes the registration process.

If you would like an e-mail confirmation, enter your email address below.

Submit Registration Information