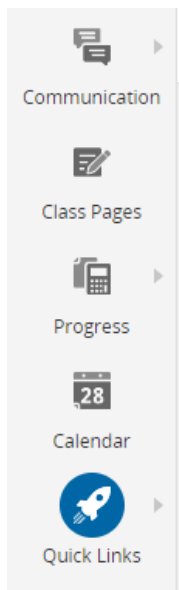



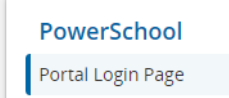
Remote Learning Assurances Requirement

The Kansas State Department of Education requires each remote learner's parent/guardian to complete and sign a Remote Learning Assurance form. For your convenience, this form can be completed and signed electronically following the steps below. **Please complete this form by September 29, 2020.** Thank you!

1: Sign in as a Parent to either Unified Classroom (<https://classroom.powerschool.com>) or the PowerSchool Parent Portal (<https://usd497.powerschool.com/public>). If you do not know your password, use the Forgot Password link. If you need to associate your students to your account, please follow the instructions at <https://www.usd497.org/PowerSchool>. Contact your child's school or the PowerSchool Team at 785-330-4300 if you need assistance with PowerSchool.

2: If your left menu looks like the image below:


















Click on Quick Links  and choose Portal Login Page. 

Otherwise, start on Step 3.

3: On the left menu, find Forms.

Heather Johnny

Navigation

-  Grades and Attendance
-  Grade History
-  Locker Information
-  Emergency SMS #
-  Attendance History
-  Email Notification
-  Teacher Comments
-  Forms
-  School Bulletin
-  Class Registration
-  Balance
-  My Schedule
-  School Information
-  Account Preferences
-  Annual Student Registration 2020-2021

4: Under Remote Learning, click on “Remote Learning Assurances” to open the form.

Remote Learning

Status	Form Name	Form Description	Category	Last Entry
Empty	Remote Learning Assurances		Remote Learning	

5: Please type your first name and last name and review and click “Yes” for all three assurances.

Remote Learning Assurances English

First Name of Parent/Legal Guardian *

Last Name of Parent/Legal Guardian *

Student Name **Student Number**
Heather Lawrence 101

By checking each box below, you have read, understand, and agree to the following assurances.

I understand that my child(ren) may need additional support to complete assigned work, and to the best of our ability, our family will provide the needed support. Additionally, our family will provide supervision during the learning process. *

Yes

I agree that my child(ren) are expected to be available to communicate with teaching staff on a regular basis as outlined by the school district. *

Yes

If a student is unable to participate on any given day (illness or doctor appointment), I will notify the school. *

Yes

You may choose a different language in the upper-right corner if you wish to answer the form in one of these languages.

English

- Arabic
- Chinese Simplified
- English
- Korean
- Spanish



* الاسم الأول لولي الأمر / الوصي القانوني

Victor

* الاسم الأخير لولي الأمر / الوصي القانوني

Schome

أسم الطالب

Heather Lawrence

رقم الطالب

101

بتحديد كل خانة أدناه ، تكون قد قرأت وفهمت ووافقت على التأكيدات التالية.

أدرك أن طفلي (أطفالي) قد يحتاجون إلى دعم إضافي لإكمال العمل المحدد ، ويقدر ما تستطيع ، ستوفر أسرنا الدعم المطلوب. بالإضافة إلى ذلك ، ستوفر عائلتنا الإشراف أثناء عملية التعلم.

*

نعم

* أوافق على أنه من المتوقع أن يكون طفلي (أطفالي) متاحين للتواصل مع أعضاء هيئة التدريس على أساس منتظم كما هو موضح من قبل منطقة المدرسة.

نعم

* إذا كان الطالب غير قادر على المشاركة في أي يوم معين (موعد المرض أو الطبيب) ، فسوف أبلغ المدرسة.

نعم

Submit



父母/法定监护人的名字 *

Victor

父母/法定监护人的姓氏 *

Schome

学生姓名

Heather Lawrence

学生号码

101

通过选中下面的每个框，您已经阅读，理解并同意以下保证。

我了解我的孩子可能需要其他支持才能完成分配的工作，并且我们将尽我们最大的努力为家庭提供所需的支持。此外，我们的家人将在学习过程中提供监督。

*

 是

我同意我的孩子可以按照学区的要求定期与教职工进行交流。 *

 是

如果学生在任何一天（疾病或预约医生）都无法参加，我会通知学校。 *

 是

Submit



부모 / 법적 보호자의 이름 *

Victor

부모 / 법적 보호자의 성 *

Schome

학생 이름

Heather Lawrence

학생 수

101

아래의 각 확인란을 선택하면 다음 보증을 읽고 이해했으며 이에 동의하는 것입니다.

본인은 자녀 (들)가 배정 된 업무를 완료하기 위해 추가 지원이 필요할 수 있으며, 최선을 다해 가족이 필요한 지원을 제공 할 것임을 이해합니다. 또한 우리 가족은 학습 과정에서 감독을 제공 할 것입니다.

*

예

나는 내 자녀 (들)가 교육구에서 정한대로 정기적으로 교직원과 의사 소통 할 수 있어야한다는 데 동의합니다. *

예

학생이 특정 일 (질병 또는 의사 예약)에 참여할 수없는 경우 학교에 알립니다. *

예

Submit

Garantías de aprendizaje remoto Spanish

Nombre del padre / guardián legal *

Apellido del padre / guardián legal *

Nombre del estudiante	Número de estudiante
Heather Lawrence	101

Al marcar cada casilla a continuación, ha leído, comprende y acepta las siguientes garantías.

Entiendo que mi (s) hijo (s) pueden necesitar apoyo adicional para completar el trabajo asignado y, lo mejor que podamos, nuestra familia brindará el apoyo necesario. Además, nuestra familia proporcionará supervisión durante el proceso de aprendizaje.

*

Si

Estoy de acuerdo en que se espera que mi (s) hijo (s) estén disponibles para comunicarse con el personal docente de manera regular como lo indica el distrito escolar.

*

Si

Si un estudiante no puede participar en un día determinado (enfermedad o cita con el médico), notificaré a la escuela. *

Si

Submit

6: An assurances form is required for each remote learner. If you are submitting for only one student, click the Submit button. Your submittal of the form acts as your electronic signature. If you have multiple students, you may submit this form for all of your students by clicking on the up arrow next to the Submit button, and choosing the “Submit for Family” option.

Submit for Family

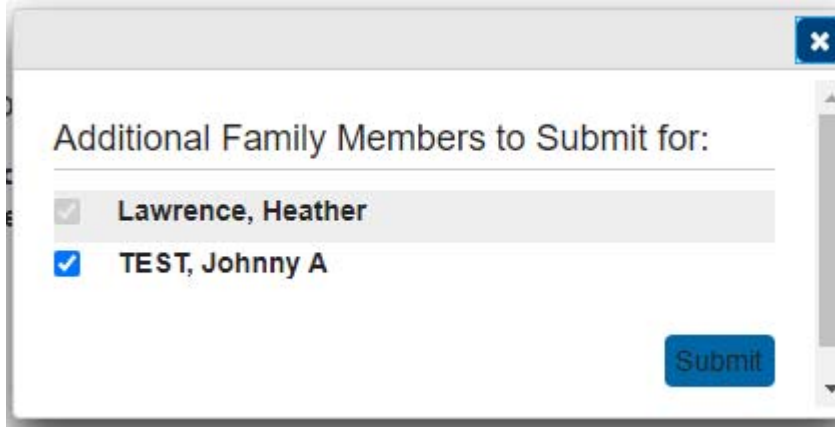
Submit & Jump to...

Form Listing

Remote Learning Assurances

Submit

Please check the box next to the name of the students for this submittal.



Additional Family Members to Submit for:

- Lawrence, Heather
- TEST, Johnny A

Submit

Click Submit in this window to Submit for Family. Your submittal of the form acts as your electronic signature.

You should see a Form Submitted confirmation message. If you used Submit for Family, you will see Submission Complete with your students' names listed.



Thank You!

Form Submitted!

OK



Submission Complete

Successful submissions:

Lawrence, Heather
TEST, Johnny A

OK

Thank you for completing this form in order for Lawrence Public Schools to stay in compliance with state requirements.