

How to Update Your Child's Emergency Information in Aspen

This process may be used to update your child's emergency information. It is required at the beginning of each school year. It will pull the current information we have listed for your child, so if you entered the form previously, those values will display. If all values are correct, you will still need to open the form and click the "Next" button, then the "Finish" button to submit it. This indicates that you have reviewed the information listed for your child.

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Logging in

1. Navigate to the Wilmington Aspen Family Portal site. You can find a quick link on our website or use the following direct link: <https://ma-wilmington.myfollett.com>.

The screenshot shows the login interface for Wilmington Public Schools. At the top left, there is a logo with the word 'Aspen' and a small image of a tree. At the top right, there is a link labeled 'About Aspen'. The main content area is a light gray background with a rounded rectangular box containing the login form. The form has the title 'Wilmington Public Schools' and two input fields: 'Login ID' and 'Password'. Below the password field, there are two links: 'Trouble logging in?' and 'I forgot my password'. At the bottom of the form is a 'Log On' button. The footer of the page contains copyright information: 'Copyright © 2003-2015 Follett School Solutions. All rights reserved.' and a navigation menu: 'Follett Corporation | Follett Software Company | Aspen | Terms of Use'.

2. Enter your login ID and password. If you have misplaced or forgotten your login information, you can email aspenhelp@wpsk12.com for assistance.

Wilmington Public Schools

Login ID

Password

[Trouble logging in?](#)

[I forgot my password](#)

Log On

3. Click the Log On button.

Wilmington Public Schools

Login ID

Password

[Trouble logging in?](#)

[I forgot my password](#)

Log On

Initiate the form

1. From the main Page, click on the word “here” in the announcement to begin. Note: The Initiate button in the Tasks widget can also be used. You may need to go to Set Preferences, click on the Home tab and check the box for Tasks to see it.

Wilmington Public Schools 2015-2016
Doe, Mary
Set Preferences Log Off
Family View

Pages Family Academics Groups Calendar

Home Page Directory

Announcements

Parents/Guardians: Click here to verify/update your child's emergency information.

To Do Doe, Matthew Week View

Overdue Online Assignments Today Tomorrow

Overdue Online Assignments

Course Assignment Due

No assignments scheduled.

Today: Tuesday, July 26

Course Assignment Completed

No assignments scheduled.

Tomorrow: Wednesday, July 27

Course Assignment Category Completed

No assignments scheduled.

Tasks Edit

Open Tasks Initiate...

Received Workflow Task Subject

No Tasks

Group Resources

- Half Day & Delayed Opening Schedules.docx
- Parent Override Letter.pdf
- Schedules for CIT Delayed Openings.docx
- SubmitEmergencyAndContactInfo.pdf
- Update Emergency/Contact Info via Aspen.pdf
- Viewing Teacher Recommendations in Aspen.pdf
- WHS Auditorium Schedule
- WHS Calendar
- WHS Daily Schedule 2016 FINAL.pdf
- WHS Program Of Studies 2016-2017.pdf
- WMS LETTER TO PARENTS AND STUDENTS.docx
- YOG 2017 Course Selection YR 16-17.pdf
- YOG 2018 Course Selection YR 16-17.pdf
- YOG 2019 Course Selection YR 16-17.pdf
- YOG 2020 Course Selection YR 16-17.pdf

Published Reports

Filename	DateUploaded	Creator	Description
No published reports			

2. A new popup will open. Make sure the workflow says “Student/Contact Emergency Info”.

Aspen: Initiate Workflow - Google Chrome
your child's emergency information

https://ma-wilmington.myfollett.com/aspn/initiateWorkflow0.do?deploymentId=ma-wiln

Initiate Workflow: Workflow Selection Step 1 of 3

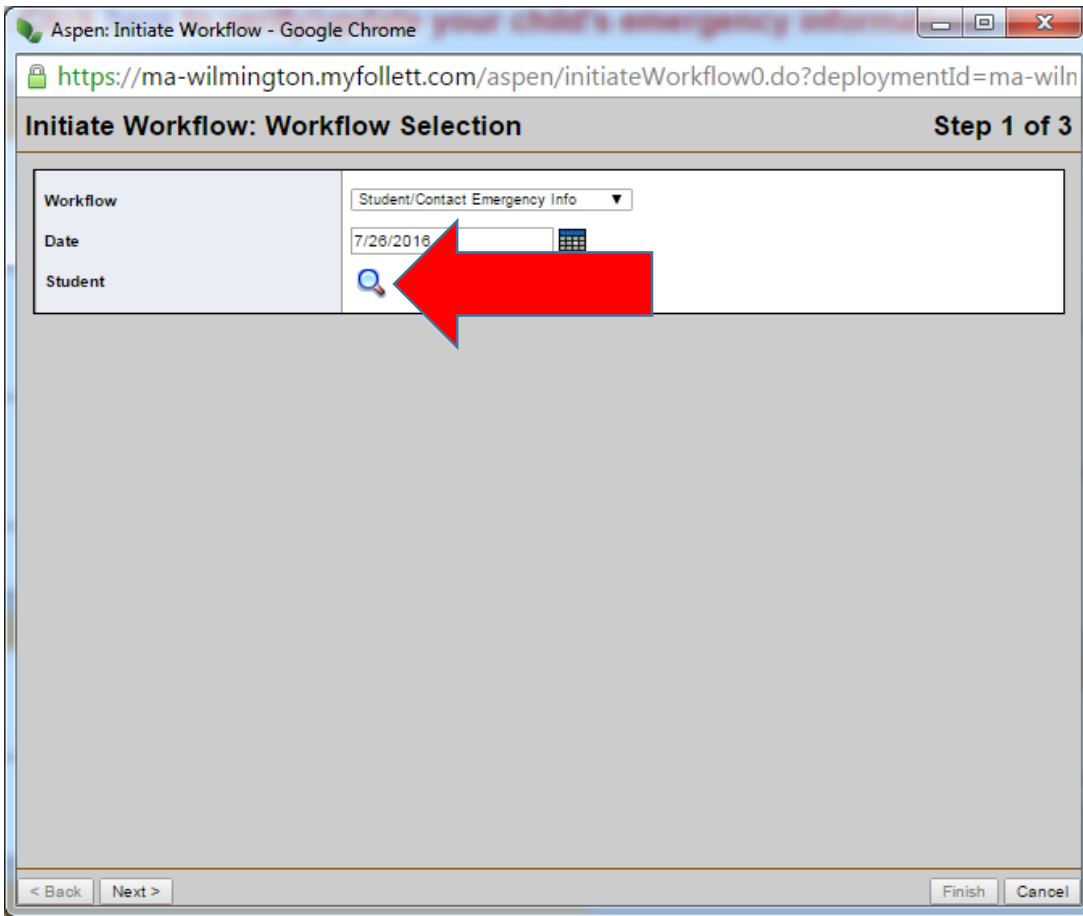
Workflow Student/Contact Emergency Info

Date 7/26/2016

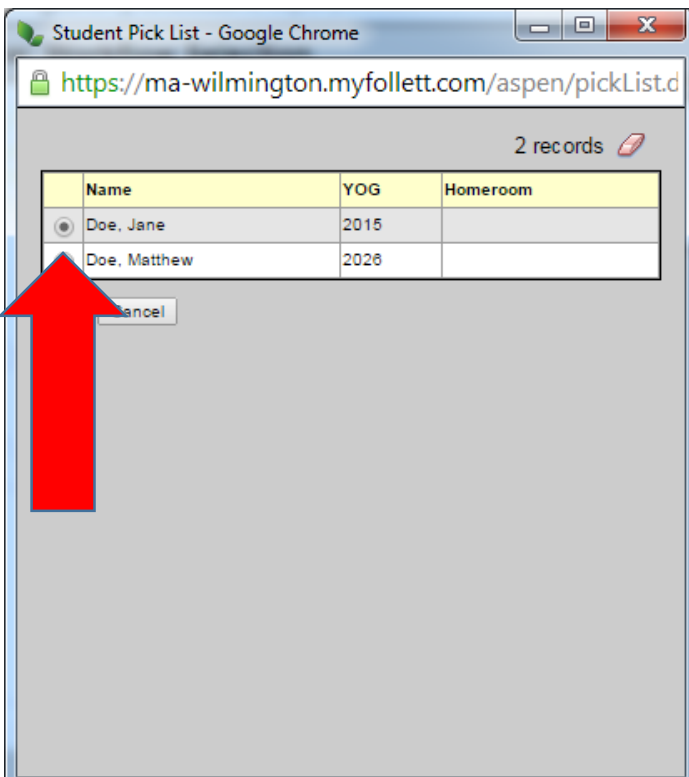
Student

< Back Next > Finish Cancel

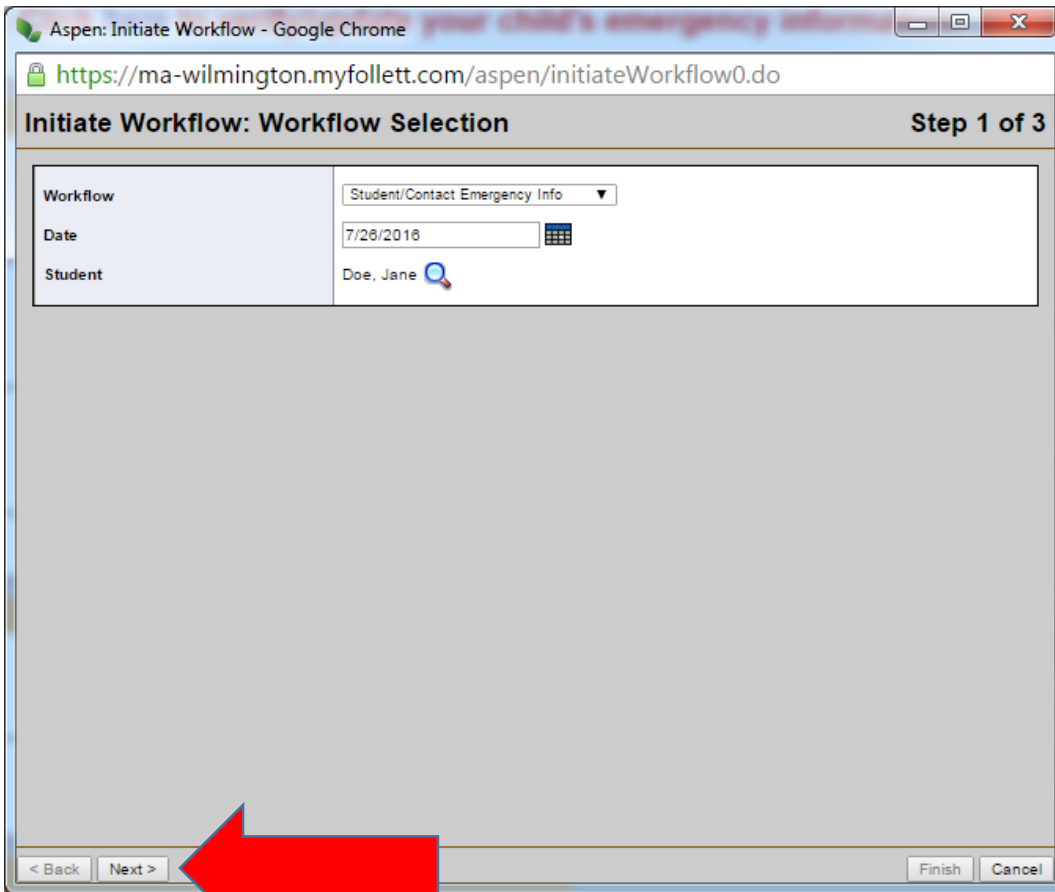
3. Click on the magnifying glass to choose which child you will be submitting the form for.



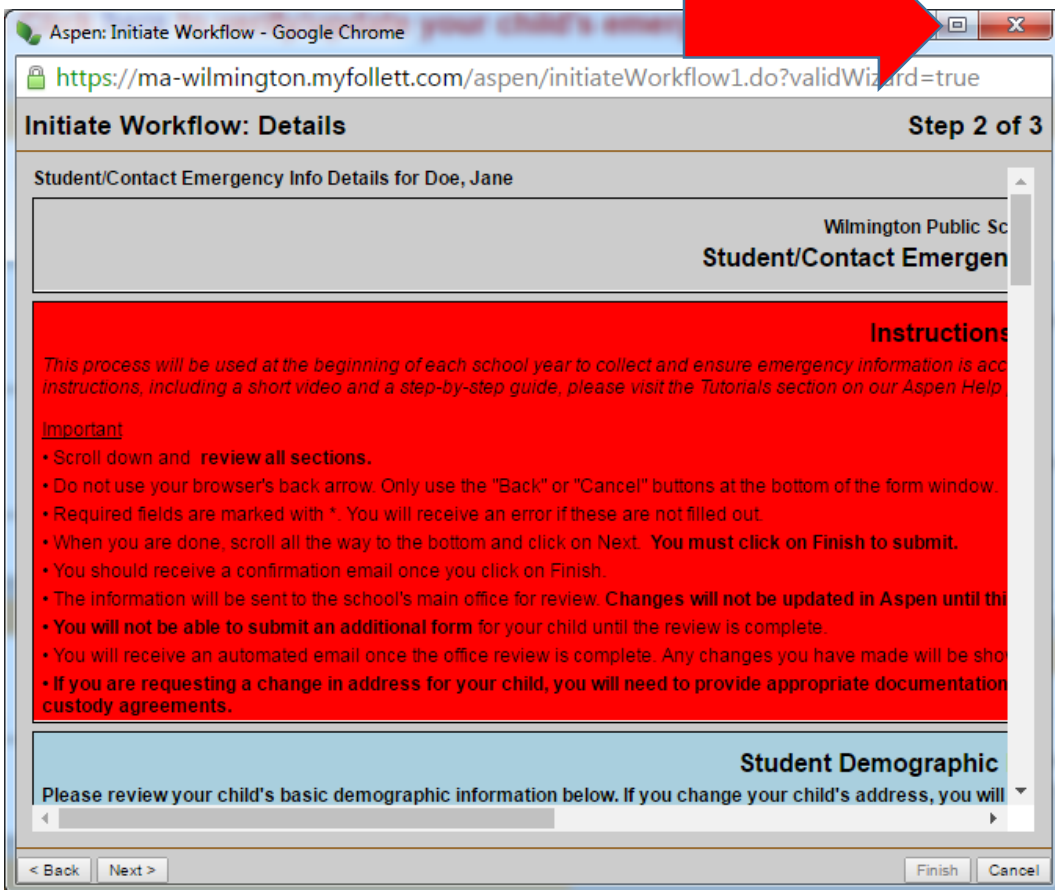
4. If you only have one child in the district, only his or her name will be displayed and the radial will be selected. If you have more than one child, select the radial button next to one of them. Click on OK to continue. **NOTE: This process collects medical information, so it needs to be completed once for each child.**



5. Once the child's name is displaying in the main form window, click on Next.



6. To avoid the left to right scroll bar, click on the Maximize button.



7. The form contains sections for Student Demographic Information, Contacts, Medical Information and Policy Signoffs. Each section will have a different color background.

Aspen: Initiate Workflow - Google Chrome
 https://ma-wilmington.myfollett.com/aspen/initiateWorkflow1.do?validWizard=true

Initiate Workflow: Details Step 2 of 3

Student/Contact Emergency Info Details for Doe, Jane

Wilmington Public Schools
Student/Contact Emergency Information

Instructions

This process will be used at the beginning of each school year to collect and ensure emergency information is accurate. It may also be used to update contact information during the school year as needed. For full instructions, including a short video and a step-by-step guide, please visit the Tutorials section on our Aspen Help page at: [WPS Aspen Help Page](#)

Important

- Scroll down and **review all sections.**
- Do not use your browser's back arrow. Only use the "Back" or "Cancel" buttons at the bottom of the form window.
- Required fields are marked with *. You will receive an error if these are not filled out.
- When you are done, scroll all the way to the bottom and click on Next. **You must click on Finish to submit.**
- You should receive a confirmation email once you click on Finish.
- The information will be sent to the school's main office for review. **Changes will not be updated in Aspen until this is complete.**
- **You will not be able to submit an additional form** for your child until the review is complete.
- You will receive an automated email once the office review is complete. Any changes you have made will be shown in Aspen after the review.
- **If you are requesting a change in address for your child, you will need to provide appropriate documentation to the school's main office.** Current documentation should also be provided in cases of legal custody agreements.

Student Demographic Information

Please review your child's basic demographic information below. If you change your child's address, you will need to submit appropriate documentation to his/her school's Main Office before the changes are approved. For more information about Family Military Status, click [here](#).

Student Details

Last Name	<input type="text" value="Doe"/>	First Name	<input type="text" value="Jane"/>	Middle Name	<input type="text" value="Marie"/>
Student's Primary Phone	<input type="text" value="978-894-8000"/>	Student's Primary Email	<input type="text" value="jane.doe@wpsk12.com"/>	Student's Alternate Email	<input type="text"/>

Household member in Military

<u>Physical Address</u>	<u>Mailing Address (if different)</u>
Address <input type="text" value="22 Carter Lane"/>	Address <input type="text" value="22 Carter Lane"/>
Apt <input type="text"/>	Apt <input type="text"/>
City, State Zip <input type="text" value="Wilmington, MA 01887"/>	City, State Zip <input type="text" value="Wilmington, MA 01887"/>

Contacts

The Emergency Priority number is used in the following way by the district:

Emergency Priority 1	Primary parent/guardian	"Phone01", "Primary Email" and "Alternate Email" is used by our notification system to send general communication from the district/school. The contact set as Emergency Priority 1 is used as the first point of contact to call or email families directly for one-to-one communication. All numbers listed for the Emergency Priority 1 contact are attempted before another contact.
Emergency Priority 2	Second parent/guardian	This contact is not used with the notification system; however, staff may use this contact should they need to contact someone directly about your child (ex: if primary contact could not be reached using any of the provided phone numbers).
Emergency Priority 3	Alternate contacts	These contacts would only be used for direct calls and only in the event that the parent/guardians could not be located. Also, additional contacts who are allowed to pick the child up should be recorded as Emergency Priority 3 with the "Can Pick Up Student" box checked. This contact will have first name "Second Auto" and last name "Call". It can be used for an additional phone number and email address for the notification system. For

< Back Next > Finish Cancel

8. Review the Instructions section. This includes important information about the process and what to expect.

Instructions

This process will be used at the beginning of each school year to collect and ensure emergency information is accurate. It may also be used to update contact information during the school year as needed. For full instructions, including a short video and a step-by-step guide, please visit the Tutorials section on our Aspen Help page at: [WPS Aspen Help Page](#)

Important

- Scroll down and **review all sections.**
- Do not use your browser's back arrow. Only use the "Back" or "Cancel" buttons at the bottom of the form window.
- Required fields are marked with *. You will receive an error if these are not filled out.
- When you are done, scroll all the way to the bottom and click on Next. **You must click on Finish to submit.**
- You should receive a confirmation email once you click on Finish.
- The information will be sent to the school's main office for review. **Changes will not be updated in Aspen until this is complete.**
- **You will not be able to submit an additional form** for your child until the review is complete.
- You will receive an automated email once the office review is complete. Any changes you have made will be shown in Aspen after the review.
- **If you are requesting a change in address for your child, you will need to provide appropriate documentation to the school's main office.** Current documentation should also be provided in cases of legal custody agreements.

Watch out for Time Outs

If you see the following screen at any point in the process, make sure to click on Continue. If you do not, you will lose any information entered and have to start the task over again.

The screenshot shows a web browser window with the address bar displaying `https://ma-wilmington.myfollett.com/aspn/initiateWorkflow1.do`. The page title is "Aspen: Initiate Workflow - Google Chrome". The main content area is titled "Initiate Workflow: Details" and is labeled "Step 2 of 3". It contains a form for "Emergency Card/Contact Update Details for Doe, Jane". The form has tabs for "Overview", "Student Demographics", "Emergency Contacts", "Medical", and "Handbook". A message states: "Please review your child's basic demographic information below. If you change the student's address, you will need to submit appropriate documentation to his or her Main Office before the changes are approved. For more information about Family Military Status, please visit: <http://www.mic3.net>".

The form includes sections for "Student Details" and "Physical Address". The "Student Details" section has fields for Last Name (Doe), First Name (Jane), Middle Name (Marie), Student's Primary Phone (978-694-6071), and Student's Email Address. There is also a checkbox for "Household member in Military". The "Physical Address" section has fields for Address (22 Carter Lane), Apt, and City, State Zip (Wilmington, MA 01887). A "Mailing Address (if different)" section is also present but empty.

A yellow warning dialog box is overlaid on the form. It contains a warning icon, the text "Your session will expire in less than one minute.", a timer showing "56" seconds, and a "Continue" button. A large red arrow points to the "Continue" button. At the bottom of the page, there are navigation buttons: "< Back", "Next >", "Finish", and "Cancel".

- Review how the Emergency Priority numbers are used by the district. This will help you identify what types of communication are sent to contacts.

Contacts

The Emergency Priority number is used in the following way by the district:

Emergency Priority 1	Primary parent/guardian	"Phone01", "Primary Email" and "Alternate Email" are used by our notification system to send general communication from the district/school. The contact set as Emergency Priority 1 is used as the first point of contact to call or email families directly for one-to-one communication. All numbers listed for the Emergency Priority 1 contact are attempted before another contact.
Emergency Priority 2	Second parent/guardian	"Phone01", "Primary Email" and "Alternate Email" are used by our notification system to send general communication from the district/school. Staff may also use this contact should they need to contact someone directly about your child (ex: if primary contact could not be reached using any of the provided phone numbers).
Emergency Priority 3+	Alternate contacts	These contacts would only be used for direct calls and only in the event that the parent/guardians could not be located. These contacts should include additional contacts who are allowed to pick the child up from school. They would need the "Can Pick Up Student" box checked.

- If you would like to receive text messages via our automated calling/email system, make sure to follow the instructions for opting in.

Text Messages

To receive text messages from our Auto-Notification system, you will need to:

- Make sure the number is listed as Phone01 or Phone02 for either the Emergency Priority 1 or the Emergency Priority 2 contact

AND

- Opt in by sending the word "Yes" or "Y" to the number 67587

- Review the contacts currently listed for your child.

The following are the contacts currently listed for your child. THREE active contacts are required. This does not include any who are marked for removal. You will not be able to submit this form unless three are listed.

**** To ADD a new contact, click on the Add button at the bottom right.**

**** To UPDATE or REMOVE a contact, click on the emergency priority number next to the person's name.**

Emer Pri	Updated	Last Name	First Name	Phone 01	Phone 02	Phone 03	Primary Email	Alternate Email	Lives With	Pick up	Receive Email	Receives Grades
<input type="checkbox"/> 1		Doe	Mary	978-694-8071	978-694-8071	978-694-8071	trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/> 2		Doe	John	978-694-8071			trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/> 3		Doe	John						N	Y	N	N
<input type="checkbox"/> 4		Call	Second Auto				trish.volpe@yahoo.com		N	N	N	N

There are three options for adjusting the contacts for your student. Clicking on the link will show you more in depth instructions for each type of change.

[Update](#)

- Should be used to change information about a contact already listed.
- This includes changing the priority number, phone numbers, etc.
- First and Last names should only be updated if there is a misspelling or legal name change.** If the contact is a completely different person, REMOVE the contact you no longer wish to have listed and ADD the new one.

[Remove](#)

- Should be used to remove one of the contacts listed currently.
- You will not see the change right away, but the contact will be removed once the office completes the review of your submitted information.

[Add](#)

- Should be used to add a contact if the person is not already listed.

To UPDATE a contact:

1. Click on the person's Emergency Priority number.

The following are the contacts currently listed for your child. THREE active contacts are required. This does not include any who are marked for removal. You will not be able to submit this form unless three are listed.

** To ADD a new contact, click on the Add button at the bottom right.

** To UPDATE or REMOVE a contact, click on the emergency priority number next to the person's name.

Emer Pri	Phone 01	Phone 02	Phone 03	Primary Email	Alternate Email	Lives With	Pick up	Receive Email	Receives Grades
<input type="checkbox"/> 1	978-894-8071	978-894-8071	978-894-8071	trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/> 2	978-894-8071			trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/> 3	Doe	John				N	Y	N	N
<input type="checkbox"/> 4	Call	Second Auto		trish.volpe@yahoo.com		N	N	N	N

2. **DO NOT CHANGE THE FIRST OR LAST NAME EXCEPT IN CASES OF A LEGAL NAME CHANGE.** If the contact should be a different priority number, select the new one from the dropdown. If he/she should not be listed at all, use the DELETE option instead.

Generic Form Child Data - Google Chrome

https://ma-wilmington.myfollett.com/aspn/workflowChildDetail.do?prefix=GFC&context=contactVerification.contactPopupNew&readOnly=false&childId=

Request to DELETE this contact

Contact Details

Important: A contact's FIRST or LAST NAME should only be changed if it is spelled incorrectly or when there has been a legal name change. If the person should no longer appear at all, check the "Request to Delete" box above. If he or she should just be a different emergency priority number, that should be adjusted via the Emergency Priority dropdown below.

First Name: Last Name:

Emergency Priority: Relationship:

Lives With Student: Can Receive Email: Can Receive Conduct Mailings: Can Receive Other Mailings:

Legal Guardian: Can Pick Up Student: Can Receive Grade Mailings:

Phone Numbers

Phone 1: Phone 1 Ext: Phone 1 Type:

Phone 2: Phone 2 Ext: Phone 2 Type:

Phone 3: Phone 3 Ext: Phone 3 Type:

Address and Email (only needed for those receiving mailings)

Address: Primary Email:

Apt: Alternate Email:

City, State Zip:

- For all other changes, click into the box on the fields you want to update and make the required changes. Click on OK when you have made all of the desired changes for the contact. *Note: This does NOT submit the change. You need to finish reviewing emergency card and click on Finish to submit any changes.*

Generic Form Child Data - Google Chrome

https://ma-wilmington.myfollett.com/aspn/workflowChildDetail.do?prefix=GFC&context=contactVerification.contactPopupNew&readOnly=false&childId=

Request to DELETE this contact

Contact Details

Important: A contact's FIRST or LAST NAME should only be changed if it is spelled incorrectly or when there has been a legal name change. If the person should no longer appear at all, check the "Request to Delete" box above. If he or she should just be a different emergency priority number, that should be adjusted via the Emergency Priority dropdown below.

First Name: Last Name:

Emergency Priority: Relationship:

Lives With Student: Can Receive Email: Can Receive Conduct Mailings: Can Receive Other Mailings:

Legal Guardian: Can Pick Up Student: Can Receive Grade Mailings:

Phone Numbers

Phone 1: Phone 1 Ext: Phone 1 Type:

Phone 2: Phone 2 Ext: Phone 2 Type:

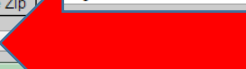
Phone 3: Phone 3 Ext: Phone 3 Type:

Address and Email (only needed for those receiving mailings)

Address: Primary Email:

Apt: Alternate Email:

City, State Zip:



To REMOVE a contact completely:

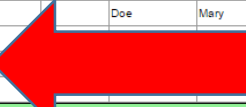
- Click on the person's Emergency Priority number.

The following are the contacts currently listed for your child. THREE active contacts are required. This does not include any who are marked for removal. You will not be able to submit this form unless three are listed.

** To ADD a new contact, click on the Add button at the bottom right.

** To UPDATE or REMOVE a contact, click on the emergency priority number next to the person's name.

Emer Pri	Updated	Last Name	First Name	Phone 01	Phone 02	Phone 03	Primary Email	Alternate Email	Lives With	Pick up	Receive Email	Receives Grades
<input type="checkbox"/> 1		Doe	Mary	978-694-8071	978-694-8071	978-694-8071	trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/> 2				978-694-8071			trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/> 3									N	Y	N	N
<input type="checkbox"/> 4			uto				trish.volpe@yahoo.com		N	N	N	N



2. Check the box next to "Request to DELETE this contact" then click on OK.

3. The contact will remain listed, but will be removed after the form has been submitted and the office review is complete.

The following are the contacts currently listed for your child. THREE active contacts are required. This does not include any who are marked for removal. You will not be able to submit this form unless three are listed.

** To ADD a new contact, click on the Add button at the bottom right.

** To UPDATE or REMOVE a contact, click on the emergency priority number next to the person's name.

	Emer Pri	Updated	Last Name	First Name	Phone 01	Phone 02	Phone 03	Primary Email	Alternate Email	Lives With	Pick up	Receive Email	Receives Grades
<input type="checkbox"/>	1		Doe	Mary	978-694-8071	978-694-8071	978-694-8071	trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/>	2		Doe	John	978-694-8071			trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/>	3		Doe	John						N	Y	N	N
<input type="checkbox"/>	4		Call	Second Auto				trish.volpe@yahoo.com		N	N	N	N

To add a new contact:

1. Click on the Add button under the contact list.

The following are the contacts currently listed for your child. THREE active contacts are required. This does not include any who are marked for removal. You will not be able to submit this form unless three are listed.

** To ADD a new contact, click on the Add button at the bottom right.

** To UPDATE or REMOVE a contact, click on the emergency priority number next to the person's name.

	Emer Pri	Updated	Last Name	First Name	Phone 01	Phone 02	Phone 03	Primary Email	Alternate Email	Lives With	Pick up	Receive Email	Receives Grades
<input type="checkbox"/>	1		Doe	Mary	978-694-8071	978-694-8071	978-694-8071	trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/>	2		Doe	John	978-694-8071			trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/>	3		Doe	John						N	Y	N	N
<input type="checkbox"/>	4		Call	Second Auto				trish.volpe@yahoo.com		N	N	N	N

- The top section with **First Name, Last Name, Emergency Priority** and **Relationship** (shown with a green rectangle in the screenshot below) should be filled out for all contacts. Non-parent/guardian contacts should keep an emergency priority 3.

Generic Form Child Data - Google Chrome
https://ma-wilmington.myfollett.com/aspn/workflowChildDetail.do?prefix=GFC&context=contactVerification.contactPopupNew&readOnly=false&detailSe

Request to DELETE this contact

Contact Details

Important: A contact's FIRST or LAST NAME should only be changed if it is spelled incorrectly or when there has been a legal name change. If the person should no longer appear at all, check the "Request to Delete" box above. If he or she should just be a different emergency priority number, that should be adjusted via the Emergency Priority dropdown below.

First Name: My
Last Name: Neighbor
Emergency Priority: 3
Relationship: Neighbor

Lives With Student:
Can Receive Email:
Can Receive Conduct Mailings:
Can Receive Other Mailings:
Legal Guardian:
Can Pick Up Student:
Can Receive Grade Mailings:

Phone Numbers

Phone 1:
Phone 2:
Phone 3:
Phone 1 Ext:
Phone 2 Ext:
Phone 3 Ext:
Phone 1 Type: Home
Phone 2 Type:
Phone 3 Type:

Address and Email (only needed for those receiving mailings)

Address:
Apt:
City, State Zip:
Primary Email:
Alternate Email:

OK Cancel

- Phone 1** and whether the contact **Can Pick Up Student** should also be updated for all contacts.

Generic Form Child Data - Google Chrome
https://ma-wilmington.myfollett.com/aspn/workflowChildDetail.do?prefix=GFC&context=contactVerification.contactPopupNew&readOnly=false&detailSe

Request to DELETE this contact

Contact Details

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First Name: My
Last Name: Neighbor
Emergency Priority: 3
Relationship: Neighbor

Lives With Student:
Can Receive Email:
Can Receive Conduct Mailings:
Can Receive Other Mailings:
Legal Guardian:
Can Pick Up Student:
Can Receive Grade Mailings:

Phone Numbers

Phone 1: 978-XXX-XXXX
Phone 2:
Phone 3:
Phone 1 Ext:
Phone 2 Ext:
Phone 3 Ext:
Phone 1 Type: Home
Phone 2 Type:
Phone 3 Type:

Address and Email (only needed for those receiving mailings)

Address:
Apt:
City, State Zip:
Primary Email:
Alternate Email:

OK Cancel

- It is best to fill out as much of the other information as possible for parent/guardians. If the contact is not a parent/guardian the other checkboxes and address/email fields can remain blank. Click on OK once the person's information has been entered.

Generic Form Child Data - Google Chrome

https://ma-wilmington.myfollett.com/aspn/workflowChildDetail.do?prefix=GFC&context=contactVerification.contactPopupNew&readOnly=false&detailSe

Request to DELETE this contact

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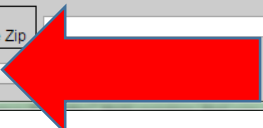
First Name: My Last Name: Neighbor
 Emergency Priority: 3 Relationship: Neighbor
 Lives With Student: Can Receive Email: Can Receive Conduct Mailings: Can Receive Other Mailings:
 Legal Guardian: Can Pick Up Student: Can Receive Grade Mailings:

Phone Numbers

Phone 1: 978-XXX-XXXX Phone 1 Ext: Phone 1 Type: Home
 Phone 2: Phone 2 Ext: Phone 2 Type:
 Phone 3: Phone 3 Ext: Phone 3 Type:

Address and Email (only needed for those receiving mailings)

Address: Primary Email:
 Apt: Alternate Email:
 City, State Zip:




- The person will now appear in the contact summary list. *Note: the contact changes will be submitted upon completion of the form. Make sure to finish reviewing and click on the Finish button to submit the change.*

The following are the contacts currently listed for your child. THREE active contacts are required. This does not include any who are marked for removal. You will not be able to submit this form unless three are listed.

** To ADD a new contact, click on the Add button at the bottom right.

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Emer Pri	Updated	Last Name	First Name	Phone 01	Phone 02	Phone 03	Primary Email	Alternate Email	Lives With	Pick up	Receive Email	Receives Grades
<input type="checkbox"/> 1		Doe	Mary	978-694-6071	978-694-6071	978-694-6071	trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/> 2		Doe	John	978-694-6071			trish.volpe@wpsk12.com		Y	Y	Y	Y
<input type="checkbox"/> 3		Doe	John						N	Y	N	N
<input type="checkbox"/> 4		Call	Second Auto				trish.volpe@yahoo.com		N	N	N	N
<input type="checkbox"/> 3		Neighbor	My						N	Y	N	N



Medical Information

1. Scroll down to the section for Medical Information.

Medical Information

Please review your child's medical information below and update if necessary. Fields marked with an * are required to be filled in. If you do not have a physician, dentist, or insurance provider, please type or select "None". The "Insurance Provider" field requires that you choose one of the options in the dropdown list. If you select "Other", make sure to type your provider name in the space provided.

Doctor Information

Physician Name* Physician Phone Number
Dentist Name* Dentist Phone Number

Insurance**

Insurance Provider* If "Other" was selected, please type your provider name. Otherwise, leave blank.
Policy Number

Health Information

Health Conditions Allergies (food, insects, medicine, environment)

Medications

My child is taking medication(s) at home or school.* My child has an EPI-PEN.*

Medication Name 1	<input type="text" value="Med 1"/>	Dose/Frequency 1	<input type="text" value="Dose"/>	Medication Name 2	<input type="text" value="Med 2"/>	Dose/Frequency 2	<input type="text" value="Dose"/>
Medication Name 3	<input type="text" value="Med 3"/>	Dose/Frequency 3	<input type="text" value="Dose"/>	Medication Name 4	<input type="text" value="Med 4"/>	Dose/Frequency 4	<input type="text" value="Dose"/>
Medication Name 5	<input type="text" value="Med 5"/>	Dose/Frequency 5	<input type="text" value="Dose"/>	Medication Name 6	<input type="text" value="Med 6"/>	Dose/Frequency 6	<input type="text" value="Dose"/>

At the discretion of the school nurse, my child may receive the following over-the-counter medications that have been approved by our school physician. Please uncheck any that you do NOT wish to authorize.

Acetaminophen/Tylenol	<input type="checkbox"/>	Alcohol-based Hand Sanitizer (contains 60% or higher)	<input type="checkbox"/>	Antacids/Tums (Calcium Carbonate)	<input checked="" type="checkbox"/>
Bacitracin/Triple Antibiotic Ointment	<input checked="" type="checkbox"/>	Bactine (contains Benzalkonium and Lidocaine HCL 2.5%)	<input checked="" type="checkbox"/>	Caladryl Lotion	<input checked="" type="checkbox"/>
Cough Drops	<input checked="" type="checkbox"/>	Diphenhydramine (Benadryl) - use with caution due to side effects	<input checked="" type="checkbox"/>	Hydrocortisone Cream 1%	<input checked="" type="checkbox"/>
Ibuprofen	<input type="checkbox"/>				

School Health Records/Emergency Transportation

I understand that my child's health information is confidential. However, federal law permits information in the school health record to be shared with school officials on a "need to know" basis and with a very limited number of other persons, including those who could help in an emergency. In case of accident, illness or other emergency, the school will try to locate immediately the parent or person responsible for the child. There may be times when a parent or guardian must dismiss their child via taxi and provide fare for his/her return home. In case of emergency, the school will attempt to contact parent/guardian in the event your child requires emergency transportation.

****IMPORTANT HEALTH INSURANCE INFORMATION****

The Commonwealth of Massachusetts requires all residents to have health insurance. If you have no health insurance, there are plans available that will provide uninsured children with affordable health care (restrictions may apply). For more information, please visit www.mahealthconnector.org or contact the school nurse. All communications will be kept confidential.

Massachusetts State Law under chapter 11C requires the Town of Wilmington Ambulance Service to transport patients to the appropriate Health Care Facility within its regular operating area. If a parent/guardian wishes his/her child go to a hospital beyond the local area, he/she must then arrange for a private ambulance.

2. Physician Name and Dentist Name are required field. If you do not currently have one, enter "None".

Doctor Information

Physician Name*

Dentist Name*

3. Insurance Provider is also required. Choose an option from the dropdown. If you select "Other", enter the provider in the space provided.

Insurance**

Insurance Provider* If "Other" was selected, please type your provider name. Otherwise, leave blank.
Policy Number

- Review/enter the rest of the information by clicking into the cells, selecting values from the dropdown menus or checking the boxes where applicable. A Yes or No value is required to indicate whether your child is taking medication at home and if he or she has an EPI-PEN.

Health Information

Health Conditions Allergies (food, insects, medicine, environment)

Medications

My child is taking medication(s) at home or school.* My child has an EPI-PEN.*

Medication Name 1	<input type="text" value="Med 1"/>	Dose/Frequency 1	<input type="text" value="Dose"/>	Medication Name 2	<input type="text" value="Med 2"/>	Dose/Frequency 2	<input type="text" value="Dose"/>
Medication Name 3	<input type="text" value="Med 3"/>	Dose/Frequency 3	<input type="text" value="Dose"/>	Medication Name 4	<input type="text" value="Med 4"/>	Dose/Frequency 4	<input type="text" value="Dose"/>
Medication Name 5	<input type="text" value="Med 5"/>	Dose/Frequency 5	<input type="text" value="Dose"/>	Medication Name 6	<input type="text" value="Med 6"/>	Dose/Frequency 6	<input type="text" value="Dose"/>

At the discretion of the school nurse, my child may receive the following over-the-counter medications that have been approved by our school physician. Please uncheck any that you do NOT wish to authorize.

Acetaminophen/Tylenol	<input type="checkbox"/>	Alcohol-based Hand Sanitizer (contains 60% or higher)	<input type="checkbox"/>	Antacids/Tums (Calcium Carbonate)	<input checked="" type="checkbox"/>
Bacitracin/Triple Antibiotic Ointment	<input checked="" type="checkbox"/>	Bactine (contains Benzalkonium and Lidocaine HCL 2.5%)	<input checked="" type="checkbox"/>	Caladryl Lotion	<input checked="" type="checkbox"/>
Cough Drops	<input checked="" type="checkbox"/>	Diphenhydramine (Benadryl) - use with caution due to side effects	<input checked="" type="checkbox"/>	Hydrocortisone Cream 1%	<input checked="" type="checkbox"/>
Ibuprofen	<input type="checkbox"/>				

- Review the important health-related notices.

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Policy Signoffs

- Scroll down to the section on Policy Signoffs.

Policy Signoffs

Please review and respond to the statements below. These statements are acknowledgement of Wilmington Public School policies. Completing this form and submitting the data will constitute a digital signature. A "Yes" or "No" value is required for each statement.

Handbook - [Click here for school handbooks](#)
 My child and I have reviewed and familiarized ourselves with the rules and regulations of the Student-Parent Handbook and we understand that we must abide by them as set forth.

Acceptable Use Policy (Technology) - [Click here for the Acceptable Use policy](#)
 My child and I agree to the terms and conditions of the Acceptable Use Policy.

Use of Video on Buses - [Click here for the Cameras on Buses policy](#)
 I hereby provide my consent for my child to be subject to all behavior and safety requirements for bus transportation promulgated by the Wilmington Public Schools, including but not limited to, photographs or videotapes of my child that may be made in conjunction with maintaining appropriate behavior and safety on the school buses.

Privacy Law - [Click here for FERPA](#) - [Click here for PPRA](#) - [Click here for MA Law](#)
 I hereby give permission for my child, a student in the Wilmington Public Schools, to have his/her name and photograph released for any newspaper articles or on the Wilmington Public Schools Web Site that reports WPS activities.

Social Media - [Click here for WPS Social Media policy](#)
 My child and I agree to the terms and conditions of the Social Media policy.

MIIS Fact Sheet - [Click here for the MIIS Fact Sheet](#)
 I have reviewed the MIIS Fact Sheet.

Please make sure to review the information about our school lunch program. Details about online payment options as well as the Free and Reduced Lunch application are available on the [Food Services](#) page of our school website.

2. A Yes or No value is required for each policy. Read the statement and choose your response in the dropdown menu.

Policy Signoffs

Please review and respond to the statements below. These statements are acknowledgement of Wilmington Public School policies. Completing this form and submitting the data will constitute a digital signature. A "Yes" or "No" value is required for each statement.

Handbook - [Click here for school handbooks](#)
 My child and I have reviewed and familiarized ourselves with the rules and regulations of the Student-Parent Handbook and we understand that we must abide by them as set forth. Yes ▼

Acceptable Use Policy (Technology) - [Click here for the Acceptable Use policy](#)
 My child and I agree to the terms and conditions of the Acceptable Use Policy. Yes ▼


Use of Video on Buses - [Click here for the Cameras on Buses policy](#)
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 I hereby give permission for my child, a student in the Wilmington Public Schools, to have his/her name and photograph released for any newspaper articles or on the Wilmington Public Schools Web Site that reports WPS activities. Yes ▼

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 My child and I agree to the terms and conditions of the Social Media policy. Yes ▼

MIIS Fact Sheet - [Click here for the MIIS Fact Sheet](#)
 I have reviewed the MIIS Fact Sheet. Yes ▼

Please make sure to review the information about our school lunch program. Details about online payment options as well as the Free and Reduced Lunch application are available on the [Food Services](#) page of our school website. No ▼
Yes ▼



Submitting the form

1. Make sure you have reviewed/updated all sections. When you are ready, click on the "Next" button at the very bottom of the form window. For some browsers, you may need to scroll to see it.

Aspen: Initiate Workflow - Google Chrome
<https://ma-wilmington.myfollett.com/aspen/initiateWorkflow1.do?validWizard=true>

Initiate Workflow: Details Step 2 of 3

Medication Name 1: Med 1, Dose/Frequency 1: Dose, Medication Name 2: Med 2, Dose/Frequency 2: Dose
 Medication Name 3: Med 3, Dose/Frequency 3: Dose, Medication Name 4: Med 4, Dose/Frequency 4: Dose
 Medication Name 5: Med 5, Dose/Frequency 5: Dose, Medication Name 6: Med 6, Dose/Frequency 6: Dose

At the discretion of the school nurse, my child may receive the following over-the-counter medications that have been approved by our school physician. Please uncheck any that you do NOT wish to authorize.

Antacids <input checked="" type="checkbox"/>	Bacitracin Ointment <input checked="" type="checkbox"/>	Bactine (contains Benzalkonium and Lidocaine HCL 2.5%) <input checked="" type="checkbox"/>
Diphenhydramine (Benadryl) - use with caution due to side effects <input checked="" type="checkbox"/>	Hydrocortisone Cream/Caladryl Lotion <input checked="" type="checkbox"/>	Ibuprophen <input checked="" type="checkbox"/>
Non-Aspirin (Acetaminophen/Tylenol) <input type="checkbox"/>		

School Health Records/Emergency Transportation

I understand that my child's health information is confidential. However, federal law permits information in the school health record to be shared with school officials on a "need to know" basis and with a very limited number of other persons, including those who could help in an emergency. In case of accident, illness or other emergency, the school will try to locate immediately the parent or person responsible for the child. There may be times when a parent or guardian must dismiss their child via taxi and provide fare for his/her return home. In case of emergency, the school will attempt to contact parent/guardian in the event your child requires emergency transportation.

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Policy Signoffs

Please review and respond to the statements below. These statements are acknowledgement of Wilmington Public School policies. Completing this form and submitting the data will constitute a digital signature. A "Yes" or "No" value is required for each statement. [Click here to review all of our "Back to School" forms, flyers and policies.](#)

Handbook - [Click here for school handbooks](#)
 My child and I have reviewed and familiarized ourselves with the rules and regulations of the Student-Parent Handbook and we understand that we must abide by them as set forth. No ▼

Acceptable Use Policy (Technology) - [Click here for the Acceptable Use policy](#)
 My child and I agree to the terms and conditions of the Acceptable Use Policy. Yes ▼

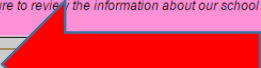
Use of Video on Buses - [Click here for the Cameras on Buses policy](#)
 I hereby provide my consent for my child to be subject to all behavior and safety requirements for bus transportation promulgated by the Wilmington Public Schools, including but not limited to, photographs or videotapes of my child that may be made in conjunction with maintaining appropriate behavior and safety on the school buses. Yes ▼

Privacy Law - [Click here for FERPA](#) - [Click here for PPRA](#) - [Click here for MA Law](#)
 I hereby give permission for my child, a student in the Wilmington Public Schools, to have his/her name and photograph released for any newspaper articles or on the Wilmington Public Schools Web Site that reports WPS activities. Yes ▼

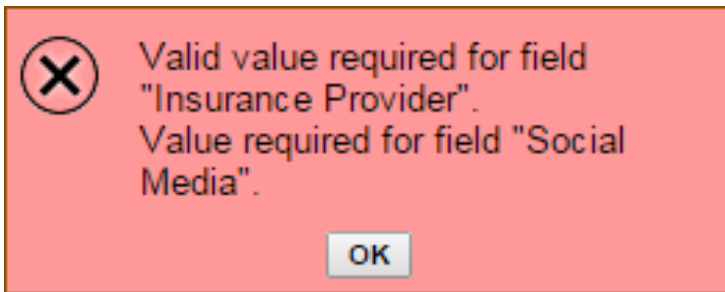
Social Media - [Click here for WPS Social Media policy](#)
 My child and I agree to the terms and conditions of the Social Media policy. No ▼

Please make sure to review the information about our school lunch program. Details about online payment options as well as the Free and Reduced Lunch application are available on the [Food Services](#) page of our school website.

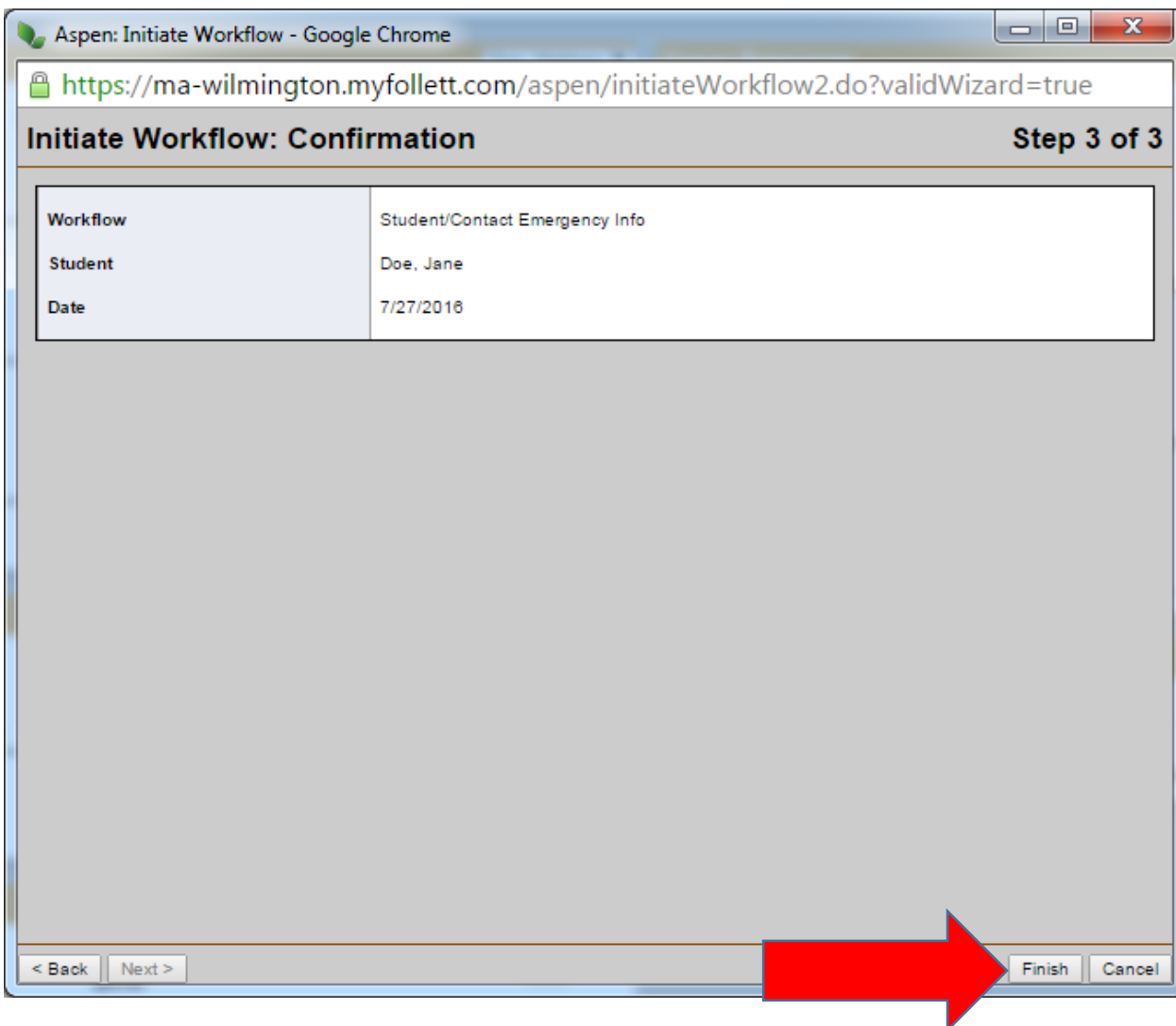
< Back Next > Finish Cancel



2. If you have an error, the message will reference what needs to be corrected. In this example, an Insurance Provider was not selected and the Social Media policy did not have a response. Go back to that field, enter the requested information and click on Next again.



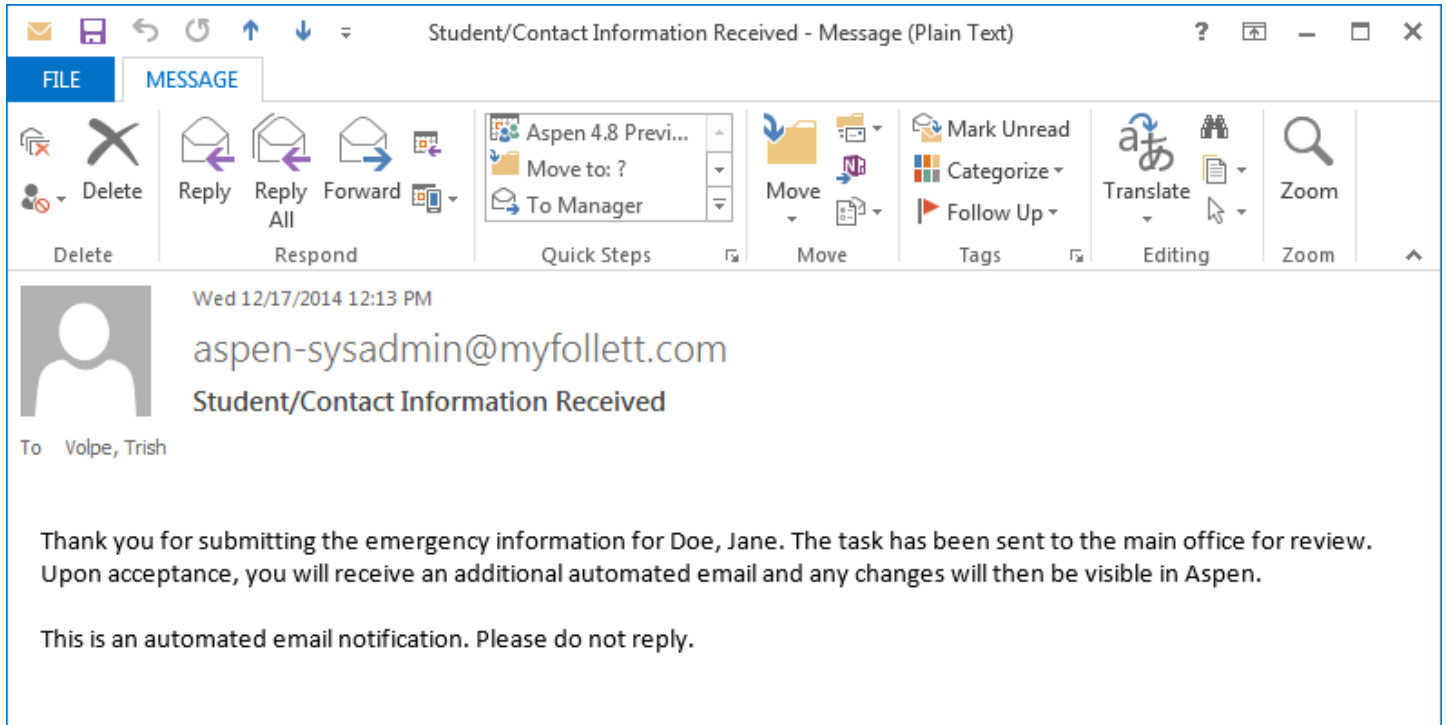
3. Once you are error free, a summary screen will display indicating that you are on step 3 of 3. Click on the "Finish" button to submit.



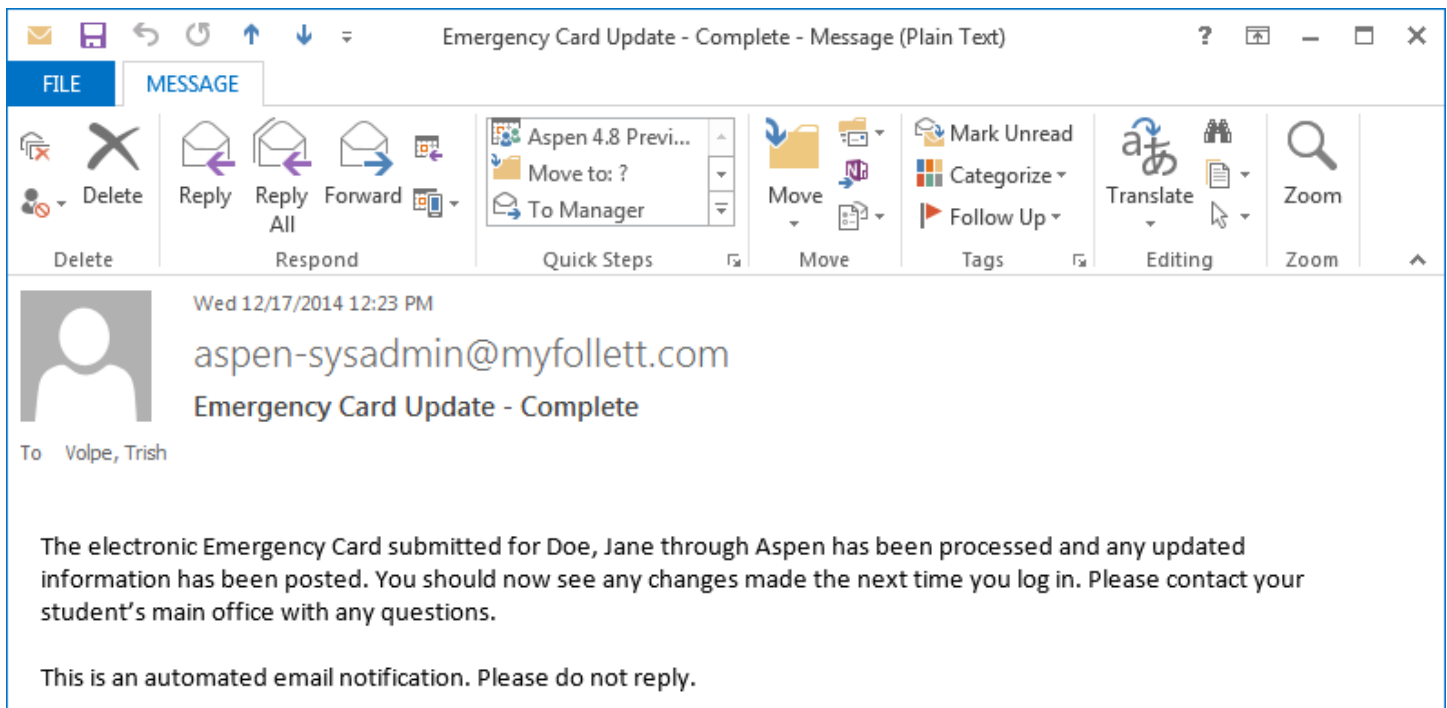
What's next?

- If you start the task again, you will not see the child in your list until the office review is complete.
- If you have another child in the district, you can now repeat the process for him/her.

- On clicking the “Finish” button, the information has been submitted to the Main Office of your child’s school. You will receive an email confirming that your information has been received.



- Once the office has reviewed the information, you will receive an additional email notification that it has been posted.



- You can then go to your student's Family to tab, Details side tab to view the changes. Click on the Medical or Policy top tabs to see that information. Contacts are viewable via a separate side tab.

Wilmington Public Schools 2015-2016
Doe, Mary


Set Preferences Log Off
Family View

Pages Family Academics Groups Calendar
Options Reports Help

Students :: 11 - Doe, Jane

Details

Demographics **Medical** Policies

First name	Jane	School > Name	Wilmington High School	Photo 
Middle name	Marie	Year of graduation	2017	
Last name	Doe	Grade level	11	
Suffix		Homeroom		
Local ID	270067	House		
Primary Student Phone	978-694-0000	Counselor		
Optional Text Number	978-423-4864	Locker	123456	

<u>Physical Address</u>		<u>Mailing Address</u>	
Address line 1	22 Carter Lane	Is identical	<input checked="" type="checkbox"/>
Address line 2		Address line 1	22 Carter Lane
Address line 3	Wilmington, MA 01887	Address line 2	
<u>E-mail</u>		Address line 3	Wilmington, MA 01887
Student's Email	jane.doe@wpsk12.com		
Student's 2nd Email			

CARES		Athletic Team		Activity	
		Athletic Team 2		Activity 2	
		Athletic Team 3		Activity 3	

Cancel