

Parsippany-Troy Hills Township School District Online Open Registration Portal Instructions

- If you are not sure of which school to register your child for based on your home address, please call 973-263-7330.
- DO NOT use the online registration if your child has ever attended the Parsippany-Troy Hills Township School District. Please contact your neighborhood school for assistance.
- DO NOT use online open registration if your child is currently enrolled in the district's preschool program. Please contact your child's school.
- Review the residency, medical, and proof of age registration requirements [here](#).

To Start: Go to <https://parents.pthsd.k12.nj.us/genesis/openReg>

The Welcome screen will direct you to click on a specific photo as a security measure. Click on the image as directed to begin.

If you are using Google Chrome, you have the ability to change the language of the registration portal by selecting language from the drop-down in the upper right hand corner of the screen

Parsippany-Troy Hills Township School District Open Registration

Select Language

Student Open Registration

Important! Before beginning the online registration process, please make sure you have reviewed all registration instructions and required documentation. [Click here to download instructions.](#)

*DO NOT use online open registration if your student has ever attended school in the Parsippany-Troy Hills Township School District. Please contact your local school if this is the case.

*DO NOT use online open registration if your child is currently a preschooler enrolled in the Parsippany-Troy Hills Township School District. Please contact the student's current school.

CLICK ON THE PICTURE ICON AS INSTRUCTED BELOW TO START

For security purposes; please click on the Planet to get started.

Step 1 - Student Information

Click on the Add Student to start the process

Register Students | Contacts and Addresses | Documents | Appointments | Home Language Survey | Review and Submit

Step 1: Please enter your student's information. You will be able to add additional students as needed.
Note: the grade level for Kindergarten is KF

No students have been entered.

Add Student

The screen below will display on your computer

Complete all fields. An * (asterisk) indicates required fields that must be completed in order to submit

FILL OUT THIS FORM AND THEN HIT THE 'SAVE STUDENT' BUTTON
*** DENOTES REQUIRED FIELDS**

Registering for School Year:*

Select the school your student will attend based on your home address.
If you are unsure, please call your neighborhood school to check.

Anticipated Grade Level:* [Missing grade level?](#)

Student First Name:*

Middle Name:

Student Last Name:* Suffix:

Nick Name:

Ethnicity:* Hispanic Not Hispanic

Select one or more races:* White Black American Indian / Alaskan Asian Hawaiian native/other Pacific Islander

Gender:*

Municipality: PARSIPPANY-TROY HILLS TWP

Date of Birth:* Age:

Refuse release of birthplace information:

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:* Not Military Connected - Student is not military-connected Active Duty - dependent of a member of the Active Duty Forces (Full Time: Army Navy Air Force Marine Corps or

Insurance Provider:

Has Med Insurance?:* Yes No Unknown

Release to NJ Family Care: Yes No Unknown

Save Student

- Please enter all information using upper and lower case.
- **Select the school** your child will attend based on your home address. If you are unsure of your local school, please call 973-263-7330
- **Anticipated Grade level** - This is the grade your child will be in the school year selected
- **Student Name** - Enter the legal first and last name of your child. Include middle name if one
- **Nick Name** - If your child goes by a different name than the legal first name, enter it here
- **Ethnicity** - Check whether your child is Hispanic or Not Hispanic
- **Race** - Select your child's race. You may select more than one race.
- **Gender** - Select your child's gender. This should match the birth certificate
- **Municipality** - This defaults to Parsippany-Troy Hills Twp. You only need to change if you live outside of Parsippany-Troy Hills Twp.
- **Date of Birth** - Enter your child's date of birth and the age will auto calculate. Students must be 5 years old on or before October 1 of the school year to be eligible for Kindergarten.
- **City of Birth** - Enter city if your child was born in the U.S.
- **State of Birth** - Enter state if your child was born in the U.S. *NJ is the first item in the drop down list.*
- **Country of Birth** - Enter the country your child was born in. *The U.S. is the first item in the drop down list.*
- **Birth certificate number** - Enter if available
- **Date First Enrolled in US School (if born outside the US)** - Include Preschool. Only required if your child was born outside of the United States.
- **Date of First Entry to US** - only required if your child was born outside of the United States
- **Primary Language:** Choose the language spoken by your child. *English is the first item in the drop down.*
- **Language spoken by family at home:** Choose the language spoken by family members at home. *English is the first item in the drop down.*
- **Military Connected Indicator:** Select whether or not a parent is an active duty member
- **Insurance Provider / Med Insurance** - Indicate whether your child has medical insurance and select the health insurance provider; if provider is not listed or you do not have insurance, there is an Unknown Option
- **Release to NJ Family Care** - This allows us to release your information to NJ Family Care if your child does not have medical insurance
- Read and acknowledge the **HIB Parent Student Awareness Form**
- **Last school attended:** Enter your child's last school and address (street, city, zip, state- or country). If your child has never attended any school enter NONE. The text box will expand as you type in it
- Indicate if your child has previously been in an **ESL program**
- Indicate if your child currently has a **504**
- Indicate if your child currently has an **IEP**
- Choose your **Marital Status**
- Choose who has **legal custody** of your child
- Indicate if your student is a child of a **Parsippany-Troy Hills School District Employee or Board Member**
- If a child's **second parent lives at a different address**, indicate if you want this parent to receive school mailings in addition to the primary parent.
- If the **child's parents live in different districts**, indicate yes and complete the form attached to this question. The completed form must be brought to your registration appointment.
- **Siblings** - Enter the names of any siblings along with date of birth, and grade level and school, if applicable. The text box will expand as you type in it. Hit return between siblings if more than one. If there are no siblings, enter NONE.
- Click the **Save Button** at the bottom of the screen done

- After you add each student a summary screen will be displayed.
 - If all required student fields have been entered, the status will indicate Complete
 - If any required fields are missing, status will indicate Missing Fields. You will not be able to submit your registration until all required fields are complete
- From the summary screen you can
 - Add Another Student
 - Modify or remove a student you have added
 - Advance to the next screen if you have entered all students you are registering

STUDENTS WHO YOU HAVE ENTERED							
STATUS		LAST	FIRST	MIDDLE	DOB	AGE	
Missing fields	1.	Smith	Susan		3/1/2015	5	<input type="button" value="Modify Student"/> <input type="button" value="Remove Student"/>
Completed	2.	Smith	Robert		1/1/2014	6	<input type="button" value="Modify Student"/> <input type="button" value="Remove Student"/>

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

If you see a **Missing Fields** status next to your student's name, click on the **Modify Student** button to edit and complete the student screen.

When done entering student information, click on Advance to Next Screen to enter contact and address information

Step 2 - Contacts and Addresses



You will be prompted to enter the home address, along with information for the first parent/guardian.

- Click on the "Add Primary Address and Primary Parent/Guardian button

**PRIMARY ADDRESS AND PRIMARY PARENT/GUARDIAN
REQUIRED***


Add Primary Address and Primary Parent/Guardian

- The primary contact should be entered as the first Parent/Guardian
- **Section 1** Enter the student's primary address. *If you do not see your street in the drop-down list, call 973-263-7330 for assistance.*
- **Section 2** Enter the Parent/Guardian who lives at this primary address with the student. Include the relationship to the student, at least one primary phone number and indicate the type (home, cell) and include a primary email address. This email will also be used to set-up your parent access account.
- Click on **Save Primary Contact Information**

SECTION 1:  ADD THE STUDENT'S PRIMARY ADDRESS	
House # *	<input type="text" value="1"/>
Street Name*	<input type="text" value="Main Street"/> Override: <input checked="" type="checkbox"/>
Apt #	<input type="text"/>
City*	<input type="text" value="Parsippany"/>
State*	<input type="text" value="NJ"/>
Zip*	<input type="text" value="07054"/>
County	<input type="text" value="Morris"/>
SECTION 2:  GUARDIAN AT PRIMARY ADDRESS	
First Name*	<input type="text" value="Mary"/>
Last Name*	<input type="text" value="Sample"/>
Relationship to Student*	<input type="text" value="Mother"/>
Primary Phone*	<input type="text" value="(123) 345-5678"/> Cell <input type="text" value="Verizon"/>
Additional Phone	<input type="text" value="888-111-2222"/> Work <input type="text"/>
Additional Phone 2	<input type="text"/> Home <input type="text"/>
Primary Email	<input type="text" value="parentemail@yahoo.com"/>

- Enter **Additional Parents/Guardians** - If the additional parent lives in the same address, click on **Use Existing Address** and select the primary address that was entered or select **Create New Address** if the additional parent lives at a different address.
- **Emergency Contacts** - **You must enter at least one emergency contact. Emergency contact must be different from the parent/guardian contacts and contact numbers previously entered.** Check off if the emergency contact has permission to pick up the student. Enter emergency contacts in the order you want the school to call them in an event a parent/guardian cannot be reached.
- **Other Contacts** - This is where the student's doctor and dentist information can be entered. Do not enter parents/guardians or emergency contacts under Other Contacts.

**PRIMARY ADDRESS AND PRIMARY PARENT/GUARDIAN
REQUIRED***

	STREET NUMBER	STREET NAME	CITY	STATE	
Primary Address	1	Main Street	Parsippany	NJ	
	TITLE	FIRST NAME	LAST NAME	PRIMARY PHONE	
Primary Guardian		Mary	Sample	123-345-5678	

ENTER ADDITIONAL PARENTS/GUARDIANS

Add Additional Parent/Guardian

**ENTER EMERGENCY CONTACTS
AT LEAST ONE REQUIRED***

	TITLE	FIRST NAME	LAST NAME	PRIMARY PHONE		
Emergency 1		Sample	Smith	123-456-7899		

Add Additional Emergency Contact

ENTER OTHER CONTACTS

Add Additional Other Contact

Advance to Next Screen

Once all contact information is entered, click **Advance to Next Screen**.








Step 3 Documents

The documents below are required for admission into the Parsippany-Troy Hills Township School District.

- You can upload the required registration documents on the Documents screen.
- **Please upload your registration documents. If you are not able to upload them, please contact the school to make arrangements to mail them in or to drop them off.**
- Please upload PDF files when possible (JPG files are accepted but limited to max size of approximately 10 mb. There are programs available that convert JPG files to PDF format on smart devices.)

UPLOAD YOUR REGISTRATION DOCUMENTS ON THIS SCREEN.

- You are not required to upload the documents here but are required to present at your designated registration appointment.
- All original documents must be presented at that time.
- Please upload PDF documents when possible. (JPG files are accepted but limited to max size of approximately 10 mb)
- Download and complete the required health forms for each student you are registering.
- [K-5 Elementary Physical Form Grades PK-5](#) or [Middle & High School Physical Form Grades 6-12](#)
- [Health History and Immunization Form \(all grades\)](#)
- Review Required Residency Documents [Here](#)

DOCUMENTS FOR TEST TEST			
DESCRIPTION	REQUIRED		
Proof of Residency Category A	No		No Document
Proof of Residency Category B - 1	No		No Document
Proof of Residency Category B - 2	No		No Document
Birth Certificate	No		No Document
Elementary Physical Exam Form (Grades PK-5)	No		No Document
Middle and High School Physical Exam Form (Grades 6-12)	No		No Document
Health History and Immunization Form	No		No Document

If you have uploaded all of your documents please click the Next Screen button below

Advance to Next Screen

Proof of Residency

Individuals must provide at least one (1) document from Category A and two (2) documents from Category B. All documents must be current.

Category A - at least one (1) of the following:

- Contract of Sale
- Mortgage document or payment book
- Property tax bill
- Recorded deed
- Signed lease

Category B - at least two (2) of the following:

- | | |
|------------------------------------|----------------------|
| Bank Statement (block out figures) | Gas Bill |
| Cable Bill | Insurance Bill |
| Credit Card Statement | Paycheck Stub |
| Driver's License | Telephone Bill |
| Electric Bill | Vehicle Registration |
| Financial Account Information | Voter Registration |
| | Water/Sewer Bill |

Or any other evidence of personal attachment to your residence or domicile.

Birth Certificate

An original birth certificate document or Passport

Medical Records

- [Health History & Immunization Form](#) **AND**
- [Elementary Physical Examination Form \(K-5\)](#) **OR**
- [Middle and High Physical Examination Form \(6-12\)](#)
- Immunization Record

For Legal Guardians Only:

Legal Guardians must provide proof of legal guardianship by providing a copy of Court orders, State agency agreements, or other evidence of court or agency placements or directives. **OR** Affidavits, certification and sworn attestations pertaining to statutory criteria for school attendance, from the parent, legal guardian, person keeping an “affidavit student,” person(s) with whom a family is living, or others as appropriate.

Step 4 - Home Language Survey

The New Jersey Department of Education requires that a Home Language Survey be completed for each student being registered.

HOME LANGUAGE SURVEYS		
STUDENT	COMPLETED	
Jane Jones	No	Begin Survey

Once you have answered the survey(s) above, please click the Next Screen button below

[Advance to Next Screen](#)

- Click on **Begin Survey**
- Answer the questions as prompted. Languages are listed alphabetically; English will show at the top of the list
- When the survey is complete, click on **Close**
- If you need to change your responses, you can reset the survey
- After you have completed a survey for each of the students you are registering, click on **Advance to Next Screen**



Step 5 - Review and Submit

- Review the information you have entered. If you need to change any information, you can click on the appropriate Edit button
- At the bottom of the screen, enter your email address so you will receive an email confirmation of your information

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

- You can create an account before submitting if you would like the option to return to the registration so you can update information and/or upload additional documents. (*Note: this is not a Genesis parent portal account; it is only for the registration*).

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

If you would like to create an account with your email please enter a password below.

Password


Confirm Password

- Click on the Submit Registration Information button

Click on the printer icon to print a .pdf of the information you entered.

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ParsIPPany-Troy Hills Township School District Open Registration


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Date created: 04/05/2020

Student Information

Student Name: Sample Student	Desired School: Troy Mills Elementary School
Date of Birth: 4/1/2015	Place of Birth: Boonton NJ, United States
Primary Language of student: English	Language spoken at home: English

- A confirmation form can be printed. This form is also emailed to you if you requested an email confirmation. The school registrar will be in touch with you if any additional information is required.