Powerschool Registration Instructions:

- 1) Click on this link: <u>WTS Powerschool Parent Portal</u> or (<u>https://uirsd.powerschool.com/public</u>)
- 2) Create an Parent Account

PowerSchool					
Student and Parent Sign In					
Sign In	Create Account				
Create an Account					
Create a parent account that allows you to view all of your students with one account. You can also manage your account preferences. Learn more.					
		Create Account			

3) **Create your Parent/Guardian Account** and Fill in the Access ID and Password you received in your email for your child.

If you have multiple children attending WTS, you will receive a separate email with a different Access ID and Password for each child.

Note: After you create your Parent account **AND** Linked your Children to your Parent account with the Access ID and Password provided, you will need to log in the Powerschool Parent Portal with your new Parent account to access Powerschool Registration.

4) **Sign In** with the Username and Password <u>you</u> <u>created.</u>

First Name	Example
Last Name	Parent
Email	eparent@example.org
Desired Username	eparent
Password	Strongest
Re-enter Password	
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Forgot Usernam	ne or Password?

Username Password 5) Select the Powerschool Registration Link on the Lower Left Hand Side of the Screen



6) **Check the Box** confirming you are older than your children :)

Agreement	
🗹 I affirm that I am 13	years of age or older.
	Continue

7) Click on the Start Form Button.

There will be button for each of your children.

	PowerSchool Re	gistration	West Tisbury Elementary School
	Welcome to PowerScho requests that you prov effectively communicat	ool Registration forr ide and maintain up e with you. Begin by	nsl West Tisbury Elementary School b to date information so that they may y selecting from the below option(s).
	Test Registration		
	Annual Stu	dent Registration Fo	orm Start Form
	English 💌		
	Back to Dashboard	Annu for Test	ual Student Registration
not	Student Information		Con Curry
	Parent / Guardian Information	3	west fis
	Emergency	Welcom this form	ne to the Annual Student Registration fo
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	Contact Information Medical Information	Stude	n. nt Information

8) Fill in the Form and Submit.

All Required Fields are highlighted in RED.

Some information will already be filled in for you.

Note: Please only fill in the information requested, not additional phone numbers or other information.

Thank you for your time!