

# Parent/Guardian Online Aspen Account Request & Student Registration

## **Creating a Parent Account**

(If you already have a Parent Account in Aspen/MyEducationBC, you can go straight to Page 3 of this document. If you have forgotten your username or password, please contact your school office.)

- 1. Go to https://myeducation.gov.bc.ca/aspen/logon.do
  - Use Chrome as your web browser. Note: Online Registration is not currently available on mobile devices.
- 2. Click on 'Request an account'.
- 3. Select Account Type. Click on 'Next Step'.

MyEducation BC Prod	Account Type
MyEducation BC Login ID	Please choose one of the available account types below.   I am a parent/guardian registering my child online Choose this option if you have never created a MyEducation BC account
MyEducation BC Password	Click here to have the account validation email resent
Login Information I forgot my password	
Login using BC Services Card below	
Enterprise BCSC Production SSO BC Services Card	Next Step 🔶

4. Enter your information in the required fields. Note: this information will be connected to the student's record as a contact. Click on 'Next Step".

· · · · · · · · · · · · · · · · · · ·	
Whitehorse	
YT V	
Y1A 4K8	
367-123-4567	
Yukon Schools	
	Whitehorse YT ~ Y1A 4K8 867-123-4567 Yukon Schools

5. Enter your email address and create a password. Click on 'Requirements' for information about password requirements. Update security question and answer fields. Click on 'Create My Account'.

	r account information below.			
Primary email * Confirm email * Password * Confirm Password * Security question * Security answer * Confirm answer *	What city did your father grow up	in? V	Requirements	

6. Read the confirmation message. Click on 'Close'.

nfirmatio	'n		
Accourt	t request processed!		
Next ster A vernication your address, password you	mail will be sent to the email address Once completed, your account will be just entered.	you specified. Please click on the activated and you'll be able to lo	e confirmation link in the email to verif gin using the email address and
Note: Be sure	to check your spam folder if you don't	see the email right away.	
			×

7. Check your email and click on the link in the verification email to activate your account. If you don't see the email, check your Spam/Junk folder.

Hi Test Parent,	
Thank you for requesting a MyEducation BC Family Portal account.	
Your request was submitted using this email address. Please click here to verify your email address and a	ctivate your account.
If you didn't request a MyEducation BC Family Portal account, please <u>click here</u> to cancel the request.	
Thank you,	
MyEducation BC System Administrator	

8. Once you have successfully verified your account, you will see an Email Validation message.



# **Creating a New Student Registration**

 Log in to your Aspen/MyEducationBC account at <u>https://myeducation.gov.bc.ca</u>. Under 'Start a New Student Registration', click on 'Initiate'.

Start a new New S	udent Registration	
🕂 Initiate		

2. In the Start Tab, select 2024-2025 in School Year Selection. Click 'Next'. Note: You can click on 'Save & Close' at any point, so that you can save your work and return to your registration later.

Start	Student	School	Family/Contacts	Additional Information	Documents	Submit	
Instruction	s						
Please complet	e each of the tabs,	and then "Subm	t" when finished.				
If you need to s	top and come back	k later, select 🖺 S	Save & Close'. All you	ur information is a	utomatically saved	when you move t	to a new tab, or select the 'Next ➔' or '⇐ Previous' buttons.
Personal Infor	mation Notice						
The information the Freedom of to health servic have any quest	required for regist Information and P es, social services ions about the info	ration purposes of rotection of Priva- or support servic rmation recorded	on this form is collected cy Act (FOIPPA, BC). es as outlined in Sect on this form, please	d by Districts and The information p ion 79(2) of the S contact your Distri	Schools in BC une rovided will be use chool Act. The info ct or School Admir	der the authority o ed for educational rmation collected histrator.	of the School Act, Section 13 and 79, and in accordance with s. 26(c) of program and administrative purposes, and if required, may be provided on this form will be protected consistent with s. 30 of FOIPPA, BC. If you
Contact informa	ation can be found	on the BC K-12 S	chool and District Co	ntact Information	page		
School Yea	r Selection						
To begin a regis	stration application	, select a school y	/ear below:				
○ 2023-2024	_						
2024-2025	]						
All your change	s are saved when	you click the Nex	t or Previous buttons	. You may click S	ave & Close at an	y time to save you	ur work and return to complete the registration application later.
	Save & Clos	e Next 🔶	X Cancel				

3. In the Student Tab, enter your child's legal name, gender and date of birth exactly as it is shown on their government-issued ID. Complete all required fields (indicated by \*). Note: Do not enter any information in the BC Personal Health Number field. Click on 'Next'.

Start	Student ormation	School	Family/Contacts	Additional Information	Docume	nts Submit				
Legal Name First * Middle Last *					Pre F	ferred Name First * Viddle .ast *				
Suffix Gender *		<b>~</b>			F	PEN 3C Personal Health N	lumber [		]	
If you wish to vol Birth and Cit	untarily iden tizenship	ify this student as b	eing a person of Indige	enous Ancestry, selec	ct one:	~				
<u>Place of birth</u> Country of birth <u>If born in Canada</u> Province of bir	h * 1 th	<b>v</b>			Co <u>lfn</u> /	untry of citizenship * o <u>t born in Canada</u> Arrival in BC Arrival in Canada		]		
Age and Grade Level Enter the student's date of birth, which will determine the grade and age on Dec 31 in the school year for which you are registering. If the calculated grade below does not match the grade you are registering for, please enter the desired grade in the Comment field on the Submit tab at the end of the registration application.										
Date of birth (dd/ Age as of Dec 31	mm/yyyy) *	0	Age							

4. In the School Tab, select Yukon Schools and select the name of the school in your <u>attendance</u> area. Click on 'Next'.

			Additional							
Start	Student 5	School Family/Cor	tacts Information	Documents	Submit					
School Se	School Selection									
All School Dis	All School District Websites provide detailed information around Kindergarten registration details that are unique to their own district processes.									
The Ministry p	rovides details around Full	I Day Kindergarten here.								
Below you will	see a list of schools partic	ipating in online registrat	on based on the selecte	d school district and	the calculated	grade level.				
Please select	from this list. If the school	desired is <b>not listed</b> as a	participant to online reg	istration:						
• E	Ensure you have the correct	ct School District selected								
• 1	ndicate the desired school	in the <b>Comment f</b> ield on	the Submit tab							
• 0	Contact the desired school	for registration information	n							
Note: If the di	strict you are registering fo	r is not available in the lis	t, please check that dist	rict's website for the	ir registration pr	ocess.				
School district	Yukon Schools	• •								
Required: Sele	ct the school appropriate fo	or your address						Grade: KF		
Filter this list by	Filter this list by school name or city:									
Requ	ested School	Add	ess	City		Phone	Start Grade	End Grade		
O Christ	the King Elementary	20 N	sutlin Dr	Whitehorse	2	867-667-3527	KF	07		
- Elijah	Smith Elementary	1399	Hamilton Blvd	Whitehorse		867-667-5992	KF	07		

- 5. In the Family/Contacts Tab, your name and contact information will automatically appear.
  - Click on the blue hyperlink on your first name. A new dialogue box will appear (see Family/Contacts image on next page). Update all fields with your information. Click 'OK'.
  - Add at least two additional contacts (parent/guardian/emergency) by clicking on 'Add'. Enter the contact's details in the dialogue box that appears (see Family/Contacts image on next page). Click 'OK'.

Note: Emergency contacts are people the school can contact in the event of an emergency if neither parent/s nor guardian/s are available.

- Siblings Click 'Add' to enter information about any school-aged siblings currently attending a Yukon school.
- When you have finished adding contacts and/or siblings, click on 'Next'.

Start	Student	School	Family	//Contacts	Additional Information	Documents	Submit			
Parent/Gua	Parent/Guardian/Other Contact									
Click on your na	Click on your name to complete your own record, then select Add to add any additional contacts.									
You must comple	ete the relationshi	p field for each co	ontact you	add.						
Click on the cont	tact's first name to	finish filling out a	any missin	g information.	8				1	
First N	Name L	ast Name.	#	Relationsh	ip Pho	one 1	Phone 1 Type	Phone 2	Phone 2 Type	Email
C Kate	s	Gullivan	1	Mother	867	-335-3454				123@gmail.com
🕂 Add	💼 Delete									
Siblings										
Click Add to add	d any siblings who	are ALREADY a	ttending a	school in this	district.					
First Name			Last Na	me		Sibling G	Sibling Grade So			
						No matching	records		l <sub>0</sub>	
🛨 Add	💼 Delete									
All your changes	are saved when	you click the Nex	t or Previ	ous buttons. \	You may click Save	e & Close at any t	me to save your work and	d return to complete the	e registration application	later.
Previous	🖺 Save & Close	Next 🔶	×	ancel						

Family/Contacts Tab – Adding Parent/Guardian and Emergency Contacts.

Complete all fields on this form for parents/guardians, except for Alternate Email. For emergency contacts, you only need to add name, relationship, phone numbers and update contact questions.

Click 'OK' to return to the Family/Contacts Tab.

Complete this for	m for at least one parer	t/guardian	
First name * Last name * Relationship * Allow portal access?			
Email Address			
For custodial parents/gu E Primary email [ Alternate email [	ardians, a primary email is require mail For Department U	d.	
Phone Informatio	n)		
Priority #	Туре	Number	Discourse will be from the descent from the second
Home phone *			Phone numbers will be formatted according to the pattern: '918-123-4567'
Cell phone			or with an extension '918-123-4567 x123'
Contact Question	IC .		
Does this contact live wit	h this student?	O Vas. O N	
Is this contact a quardiar	n for this student?	⊖ Yes ⊖ N	lo
Can this contact pick up	the student?	⊖ Yes ⊖ N	10
Address fields are opti	onal for non-custodial contacts		
Physical Address	i		
Is the physical address t	he same as the student?		
Mailing Address			
Mailing address some of	the physical address?		
wanny audress same as	s the physical address ?		
𝕶 OK 🗶 Cancel			

- 6. In the Additional Information Tab, enter any relevant information in the following areas:
  - School History Enter any prior school history, including Learning Together or StrongStart Programs.
  - Medical Information Click 'Add' to enter any medical condition(s) and select Yes or No to indicate if the condition is life-threatening. Use the Medical Notes field to provide further information if necessary.
  - Student Services Support and Language Information Complete these fields with the requested information.

#### Click 'Next'.

Start	Student School	Family/Contacts Addit	tional Documents	Submit	
School History	1				
Last School or Strong	gStart/Program of Attendance				
No previous school				Previous school address	
Date last attended				Previous school city	
Previous school grad				Previous school country	
Previous school distr	rict				a
Previous school nam	ne			Comment	
Previous school phor	ne				
Has the stu If yes, what is the na Medical Inform	ident ever attended a school in ime of the last school attended nation	this District?			
Does this student hav	ve a medical condition? Click A	dd and provide a description o	of the condition.		
Medical Conditio	on			Life Threatening	
			No match	ning records	
Student Servic	es Support ident previously received Stude mown)	int Services Support?			
Language Info	rmation	e language)?			
*		o languago/:			
What are the primary	languages used in the home r	egardless of <mark>t</mark> he language spo	ken by the student?		
What additional langu	uages are spoken by the stude	nt?			
All your changes are	saved when you click the Next	or Previous buttons. You may	y click Save & Close at a	any <mark>t</mark> ime to save your work a	nd return to complete the registration application later.
🗲 Previous 🖺	) Save & Close Next 🗲	X Cancel			

7. In the Documents Tab – Click on 'Upload' to upload a digital copy or a photo (.jpeg or .pdf formats) of your child's government-issued ID. If relevant to your child's application, please also upload a digital copy of the <u>Catholic schools of Whitehorse admission package</u> and your child's baptismal certificate.

Note:

• Once the student registration is accepted or denied by the school, any uploaded documentation will be deleted by an overnight process.

- If you are unable to upload the digital documentation, skip this step. You will need to make an appointment at the school at a later date to bring paper copies in for verification.
- Do not upload proof of residence.

Click 'Next'.

Start	Student	School	Family/Contacts	Additional Information	Documents	Submit	
Document	ation						
Required D	ocumentation t	for Students I	New to the Distr	ict			
The following is • Ui • Pr	s a list of required de pload documents wi rovide documentatio	ocumentation to c ith your registratio on directly to the s	omplete school regis n application or chool prior to accepta	tration. You may ance of your regi	stration application	]	
Proof of school	age and status in C C Services Card, Bi	Canada. This can rth Certificate, Va	be shown using the fi id Passport, Immigra	ollowing forms of tion Documents,	identity verification Permanent Resider	documents: nce Card for both you a	and your child
• Pr aç	roof of ordinary resid greement)	dence (a docume	nt such as your curre	nt year property	tax receipt, current r	nonth rental receipt, or	r a purchase/rental
Note: Further d	locumentation may l	be requested.					
Name			Filename				Document
					No matchir	ng records	
+ Upload	箇 Delete						
All your change	es are saved when y	you click the Next	or Previous buttons	You may click \$	ave & Close at any	time to save your work	rk and return to complete the registration application later.
← Previous	🖺 Save & Close	Next 🗲	X Cancel				

8. Submit Tab – Enter any final comments related to your child's registration before submitting.

Note:

- If you are registering your child for Selkirk Elementary School, please indicate if the registration is for the English stream or French Immersion program.
- If you still need to add additional information in other tabs, click 'Previous' to go back, or 'Save & Close' to save your work.

If you are ready to submit, click on 'Submit'. This will send your application to the school you selected and you will no longer be able to edit your application.

Start	Student	School	Family/Contacts	Additional Information	Documents	Submit				
Done!										
Congratulations! You have reached the end of the Registration application.										
Comment : Enter any final notes or comments for the registrar (optional)										
							Ð			
You may click Save and Close at any time to save your work and return to complete the registration application later.										
Before submitti	ng your registration u click the <b>Submit</b> t	application, ple	ase review the informa ot be able to edit this F	ition you have ent	tered by clicking or	i each tab.				
Previous	🖹 Save & Close	Next 🄶	🕜 Submit	X Cancel						

8. Once you click on Submit, you will receive the following message. Click on 'Print' to print a copy of your submission.

Thank you for completing this online registration.								
The next step is for the school to review and accept the registration. You will receive an email notification when your registration has been accepted.								
Name	Description	Print						
Online Registration Summary								
Print     X Close								

9. Check your email for confirmation from the school that your child's registration has been received.

 Subject
 FW: Online Registration for test student received

 This is confirmation that we have received the registration you submitted for {student name}.

 The office will review your registration. Once accepted, you will be notified at this email address with a confirmation of the assigned school.

 Thank you for using our Online Registration system.

## What happens next?

Online registration for Kindergarten begins on February 1, 2024.

The school will review your child's registration and

- Request any further information or documentation that is needed.
- If your child's registration is not accepted by the school you selected, the school will contact you to tell you what the next steps are.

Once your child's registration has been accepted by the school, you will receive an email confirmation. Your school will also contact you to share additional information about kindergarten orientation and other important school dates, etc.