

## Aspen Contact Verification Workflow for Parents/Guardians

Welcome to the contact verification workflow. This contact verification workflow will allow parents to update student information online through the Aspen Family Portal.

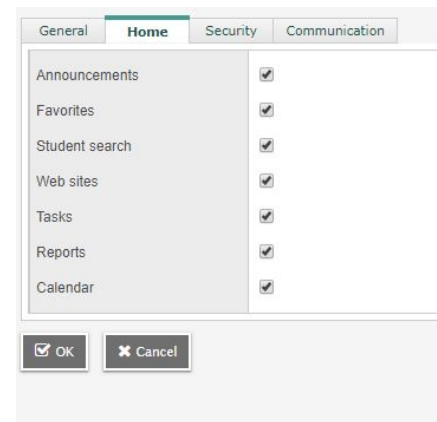
Log into the [Aspen Family Portal](#) using the parent username and password. This login info had previously been emailed\*. If you need assistance with logging in, please visit [How to log into the portal](#). Be sure to enable your browser to allow pop-ups for this site. Please maximize the pop up window to ensure you can read and review all information.

\*If you are a new family to Littleton and have registered for the start of the new school year, you will be receiving information about your username in password in September and will not need to complete this workflow at this time.

### First Time using Contact Verification Workflow - Enable TASKS

The first time you use the contact verification workflow you must **enable TASKS**.

1. Check that you are on the Pages top tab of the Aspen portal.
2. Click on your username (top right) and select **SET PREFERENCES**.
3. Select the **Home** Tab.
4. Check **Tasks**.
5. Click **OK**




The Tasks section will now be visible.

### Initiate the Contact Verification Workflow

1. Check that you are on the Pages top tab.
2. Locate **TASKS** (above published reports)
3. Click the **+Initiate** box.



## STEP 1 of 3 - Initiate Workflow

1. Workflow should default to Contact Verification and today's date.
2. Use the  magnifying glass to select your student.
3. Select your student.
4. Click **NEXT**

**\*\*\*You will need to initiate a new workflow for each student.\*\*\***

**Initiate Workflow: Workflow Selection**
**Step 1 of 3**

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Workflow	<input style="width: 90%;" type="text" value="Contact Verification"/>
Date	<input style="width: 90%;" type="text" value="7/31/2019"/>
Student	<input style="width: 90%;" type="text"/>

## STEP 2 of 3 - Review Information

**\*\*\*ALL 6 Tabs must be reviewed and updated before NEXT step\*\*\***

**DO NOT CLICK NEXT UNTIL LAST TAB (Parent Signature Tab)**

**TAB 1 - Demographics Tab** You will NOT be able to edit the name, physical or mailing address on this page. Review information for accuracy and contact your child's school after completing this workflow. Then select the Military Family Status tab.

**Initiate Workflow: Details**
**Step 2 of 3**

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Contact Verification Details for [REDACTED]

Demographics
Military Family Status
Emergency Notification Phone Numbers
Insurance
Contacts
Parent Signature

**If the information below is incorrect please contact your child's school.**

First Name	[REDACTED]
Middle Name	[REDACTED]
Last Name	[REDACTED]
Student Date of Birth	[REDACTED]

**If your student's physical address is different below please contact your child's school.**

Home Phone	[REDACTED]
Street Address	[REDACTED]
Apartment #	[REDACTED]
City, State Zip	Littleton, MA 01460

**If your student's mailing address is different than the one below, please contact your child's school.**

Street Address	[REDACTED]
Apartment #	[REDACTED]
Mailing City, State Zip	Littleton, MA 01460

**Please click on the Military Family Status tab.**

← Previous
Next →
Finish
Cancel

**TAB 2 - Military Family Tab** Review and respond to the military family status question at the bottom of the page by selected **Yes** or **No**. The Federal No Child Left Behind Act of 2002 requires Littleton High School to provide directory information such as student names, addresses and phone numbers to military recruiters when requested. You have the right to opt out of this requirement and deny disclosure of this directory information to the military by NOT putting a checkmark in the box.

Then select the Emergency Notification Phone Numbers tab.

Initiate Workflow: Details Step 2 of 3

Contact Verification Details for [REDACTED]

Demographics	<b>Military Family Status</b>	Emergency Notification Phone Numbers	Insurance	Contacts	Parent Signature
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**Military Family Status**

The Massachusetts State Legislature has elected to participate in the MIC3 (Military Interstate Children's Compact Commission). Your participation is voluntary. Littleton Public Schools is proud to assist in the transition for our military families. For more information please visit: [Military Interstate Children's Compact Commission](#)

Massachusetts State Requirement:

- An active duty member of the uniformed services, National Guard or Reserve on active duty orders.
- A member or veteran medically discharged or retired within one year.
- An active duty member of the uniformed services, National Guard or Reserve who died on active duty.

Please select your military family status: \*

Please click on the **Emergency Notifications Phone Numbers** tab above to verify your phone contact information.

**TAB 3 - Emergency Notification Phone Number Tab** Verify that the correct home, cell and work numbers are entered, update as necessary. All phone numbers must be entered in the following format (\*\*\*)\*\*-\*\*\*\*. Then select the Insurance tab.

**\*\*These numbers are used for school delays or school closure notifications through our automated call system. \*\***

Initiate Workflow: Details Step 2 of 3

Contact Verification Details for [REDACTED]

Demographics	Military Family Status	<b>Emergency Notification Phone Numbers</b>	Insurance	Contacts	Parent Signature
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These numbers will be used for school delay or school closure notificatons. Any and all numbers provided below will receive a phone call through our automated call system. Please enter your phone number in the following format (\*\*\*)\*\*-\*\*\*\*

Phone 1 (H)

Phone 2 (C)

Phone 3 (W)

Please click on the **Insurance** tab above to enter the type of Insurance provider.

**TAB 4 - Insurance Tab** Select the appropriate Health Insurance provider type by clicking on the magnifying glass. This question is required.

Then select the Contacts tab.

**Initiate Workflow: Details** Step 2 of 3

Contact Verification Details for [Redacted]

Demographics | Military Family Status | Emergency Notification Phone Numbers | **Insurance** | Contacts | Parent Signature

Please choose your Insurance type by clicking on the magnifying glass.

Health Insurance Provider \*

Please click on the Contacts tab above to edit your Contact Information.

**TAB 5 - Contacts Tab** Carefully review that your student's emergency contact information is accurate and update as necessary. Contact #1 and #2 are typically parents or guardians. Contact #1 will be the primary contact in the event of an emergency and receives access to the Aspen Family Portal. It is strongly suggested that you provide two additional contacts in the event that we are unable to reach Contact #1 or Contact# 2. All phone numbers must be entered in the following format (\*\*\*)\*\*-\*\*\*\*.

Then select the Parent Signature tab.

**Initiate Workflow: Details** Step 2 of 3

Contact Verification Details for [Redacted]

Demographics | Military Family Status | Emergency Notification Phone Numbers | Insurance | **Contacts** | Parent Signature

This data is updated annually to ensure that your child's emergency contact information is accurate. It is important that all information is verified carefully, necessary changes are made, and email addresses entered carefully. Please be sure to enter the first and second contact in the order of preference, typically these are parents or guardians. The first contact will be the primary contact in the event of an emergency and receives access to the Aspen Family Portal. It is strongly suggested that you provide two additional people who may be contacted in the event that we are unable to reach either of the first two people listed. Please enter your phone number in the following format (\*\*\*)\*\*-\*\*\*\*

	EmergPri	Last name	First name	Home	Cell	Work	Address	City, State Zip	Email01	Relationship
<input type="checkbox"/>	1	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	mom
<input type="checkbox"/>	2	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	Littleton, MA 01460	[Redacted]	Father
<input type="checkbox"/>	3	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	Littleton, MA 01460		Friend
<input type="checkbox"/>	4	[Redacted]	[Redacted]	[Redacted]						Friend

To ADD a contact to the list above, click on the Add button above

To DELETE a contact from the list above  
Click on the checkbox to the left of the contact(s) you want to delete  
Click the Delete button above right

Please click on the Parent Signature tab to complete.

**TAB 6 - Parent Signature Tab** This page includes your permission of sharing of student achievements, military information consent (**grades 11 and 12 only**), Student Handbook and Policy review and acknowledgment. Check the boxes as necessary. Click on the calendar icon to add today's Date as this date is required.

**Initiate Workflow: Details** **Step 2 of 3**

Contact Verification Details for [REDACTED]

Demographics	Military Family Status	Emergency Notification Phone Numbers	Insurance	Contacts	<b>Parent Signature</b>
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**SHARING OF STUDENT ACHIEVEMENTS**

LPS has a proud tradition of celebrating student achievements by sharing them with our community. We utilize a variety of formats including displays in public buildings, newspapers, school/district websites, television and other social/media platforms approved by the school/district administration. This information may include student's name, picture, class/grade, work samples, and other evidence of participation in LPS programs.

I give permission for "Sharing of Student Achievements" as described above.

**MILITARY INFORMATION CONSENT FOR STUDENTS GRADES 11 AND 12 ONLY**

The Federal No Child Left Behind Act of 2002 requires Littleton High School to provide directory information such as student names, addresses and phone numbers to military recruiters when requested. You have the right to opt out of this requirement and deny disclosure of this directory information to the military by NOT putting a checkmark in the box..


I give permission for my child to receive Military Information

**STUDENT HANDBOOK AND POLICY REVIEW**

We hereby acknowledge that we have read and agree to comply with the information provided on the documents listed below.

Click here for [Student/Parent Handbook](#)

Click here for [Technology Responsible Use](#)

Parent Acknowledgement \*       Student Acknowledgement \*       Signature Date \* 8/15/2019 

**COMPLETE THE VERIFICATION PROCESS by selecting the NEXT button at the bottom of the form.**

← Previous    Next →    Finish    Cancel

NOW CLICK **Next** (lower left) for STEP 3

**STEP 3 of 3 - Confirmation**

1. If you would like to review your information, you can click previous to go back.
2. Click **Finish** (lower right)!

Initiate Workflow: Confirmation		Step 3 of 3	
Workflow	Contact Verification		
Student	[REDACTED]		
Date	7/31/2019		
<a href="#">← Previous</a>		<a href="#">Next →</a>	
		<a href="#">🚩 Finish</a>	
		<a href="#">✕ Cancel</a>	

**Important**

- If you have more than one child in the Littleton Public Schools, you must initiate a **Contact Verification Workflow for each child**. Return to Initiate Contact Verification Workflow.
- The changes you submit will be reviewed by the school office and will be posted to your child's student record typically within 72 hours.
- If you have any questions, please contact your child's school .