



# Spring Hill

SCHOOL DISTRICT

## Skyward Family Access Sign Up Form

Please fill in the appropriate information below for each parent and/or guardian that would like to have a login and password assigned to them so they can view their student's information, grades and progress in Family Access. Parents and/or guardians of the same student(s) can share the same login and password if that would be easier for them. If the spaces below are insufficient to accommodate your family, please list additional guardians on the back of this form.

Student(s) \_\_\_\_\_

Guardian Name \_\_\_\_\_

Email \_\_\_\_\_

Guardian Name \_\_\_\_\_

Email \_\_\_\_\_

Please check this box if additional Guardians are listed on the back of this form.

Please note, you must return this form **in person** to your student's office and when returning this form, you will be asked to present a photo ID for security purposes.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Office Use Only: <input type="checkbox"/> Photo ID verified ____ Staff Initials
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