



COMMUNITY CONSOLIDATED
SCHOOL DISTRICT 59

NEW STUDENT ONLINE REGISTRATION HELP GUIDE



FIRST STEP

(ACCOUNT REQUEST SCREEN - NEW FAMILIES ONLY)

You can use [this link](#) to access the first screen to request an account with Skyward Family Access.

Complete this step only if you have no students currently enrolled in CCSD59.

Account Request

This form is the first step to enrolling your new student online. Complete it to request an account that you will use to log in to a secure system.

Complete required fields to request an account to enroll your students. Spanish translations of the required fields are below.

Complete los campos obligatorios para solicitar una cuenta para inscribir a sus estudiantes. Las traducciones al español de los campos obligatorios se encuentran a continuación.

- Guardian Legal First Name (Nombre del tutor legal)
- Guardian Legal Last Name (Apellido del tutor legal)
- Guardian Email Address (Dirección de correo electrónico del tutor)
- Re-type Guardian Email Address (Vuelva a escribir la dirección de correo electrónico del tutor)
- Guardian Primary Phone Number (Número de teléfono principal del tutor)
- Address (Dirección)
- House Number (Número del hogar)
- Street Name (Nombre de la calle)
- Zip Code (Código postal)

Enter the name of the legal parent/guardian of the student you want to enroll

* Guardian Legal First Name:

* Guardian Legal Last Name:

Guardian Legal Middle Name:

Guardian Legal Name Prefix:

Guardian Legal Name Suffix:

Guardian contact information

* Guardian Email Address:

* Re-type Email Address:

* Guardian Primary Phone Number:

Address:

* House #:

* Street Name:

Apartment:

P.O. Box:

Address 2:

City:

State:

* Zip Code:

Asterisk (*) denotes a required field

Click here to submit Account Request

FIRST STEP

(ACCOUNT REQUEST SCREEN - NEW FAMILIES ONLY)

Type your information into all required(*) fields to request a Skyward account for your student.

Once you put in your address, a dropdown menu will appear with options to select via our system. If the address you select does not match, please go back one step and select another option with your address.

•Guardian Email Address (*Dirección de correo electrónico del tutor*)
•Re-type Guardian Email Address (*Vuelva a escribir la dirección de correo electrónico del tutor*)
•Guardian Primary Phone Number (*Número de teléfono principal del tutor*)
•Address (*Dirección*)
•House Number (*Número del hogar*)
•Street Name (*Nombre de la calle*)
•Zip Code (*Código postal*)

Enter the name of the legal parent/guardian of the student you want to enroll

* Guardian Legal First Name: Justin
* Guardian Legal Last Name: Sampson
Guardian Legal Middle Name:
Guardian Legal Name Prefix:
Guardian Legal Name Suffix:

Guardian contact information

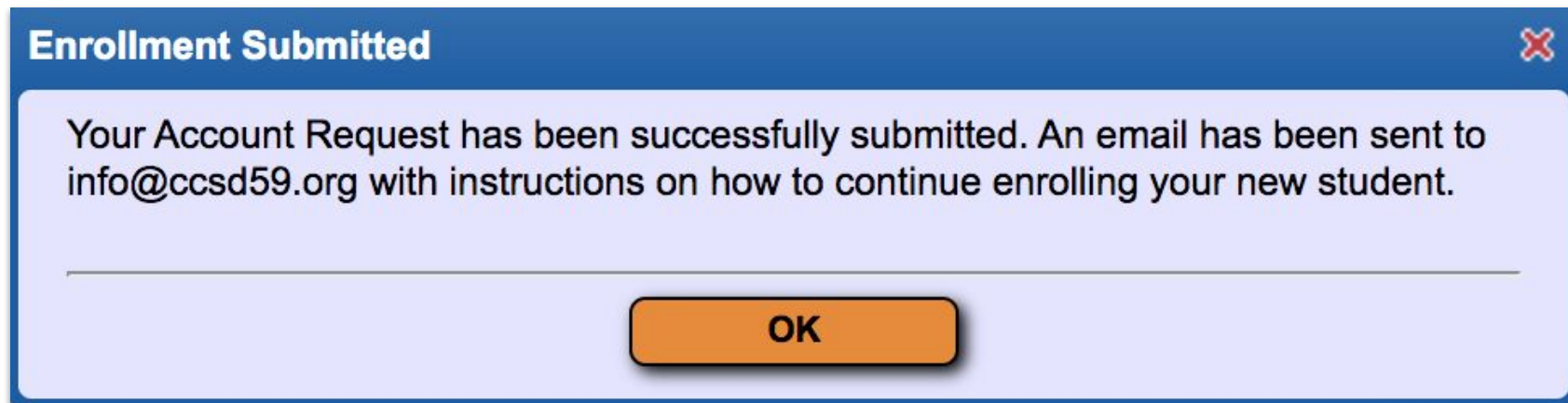
* Guardian Email Address: info@ccsd59.org
* Re-type Email Address: info@ccsd59.org
* Guardian Primary Phone Number: 4195658525
Address: * House #: 1003 * Street Name: Leicester
P.O. Box:
Address 2: LEICESTER
Leicester Rd
State:

Asterisk (*) denotes a required field
[Click here to submit Account Request](#)

FIRST STEP

(ACCOUNT REQUEST SCREEN - NEW FAMILIES ONLY)

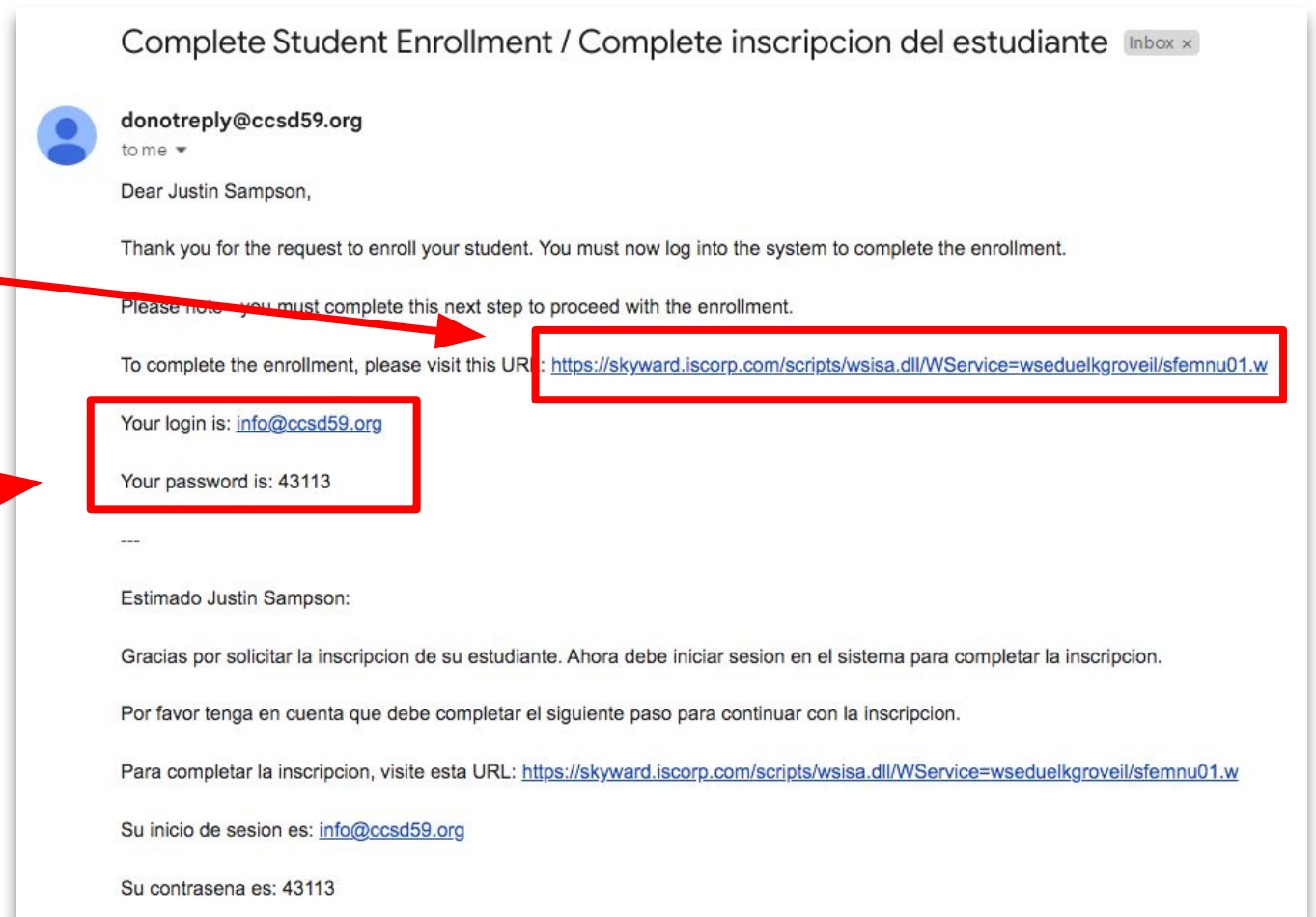
After you submit your application, you will receive a pop-up message to confirm it was successfully received. After it is reviewed, you will get an automatic email letting you know if your application was approved or denied.



CONFIRMATION EMAIL

Your automatic email will provide you with a link to complete the enrollment process.

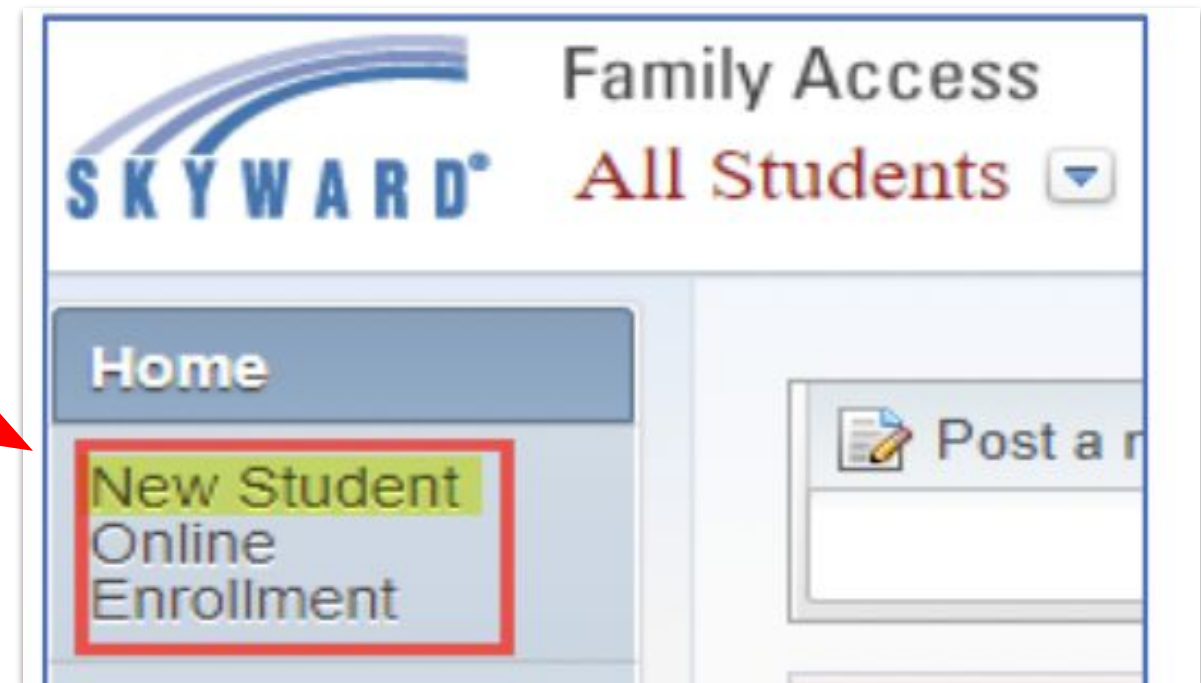
Please use the email you provided to log in, as well as the five-digit password in this message.



FAMILIES WITH CURRENT STUDENTS

If you are a current CCSD59 family and are enrolling another child into one of our schools, you can skip the previous steps.

Instead, log into Skyward Family Access, and you will see New Student Online Enrollment as an option in the top left. This will begin the rest of the registration process, which is the same for both new and current families.

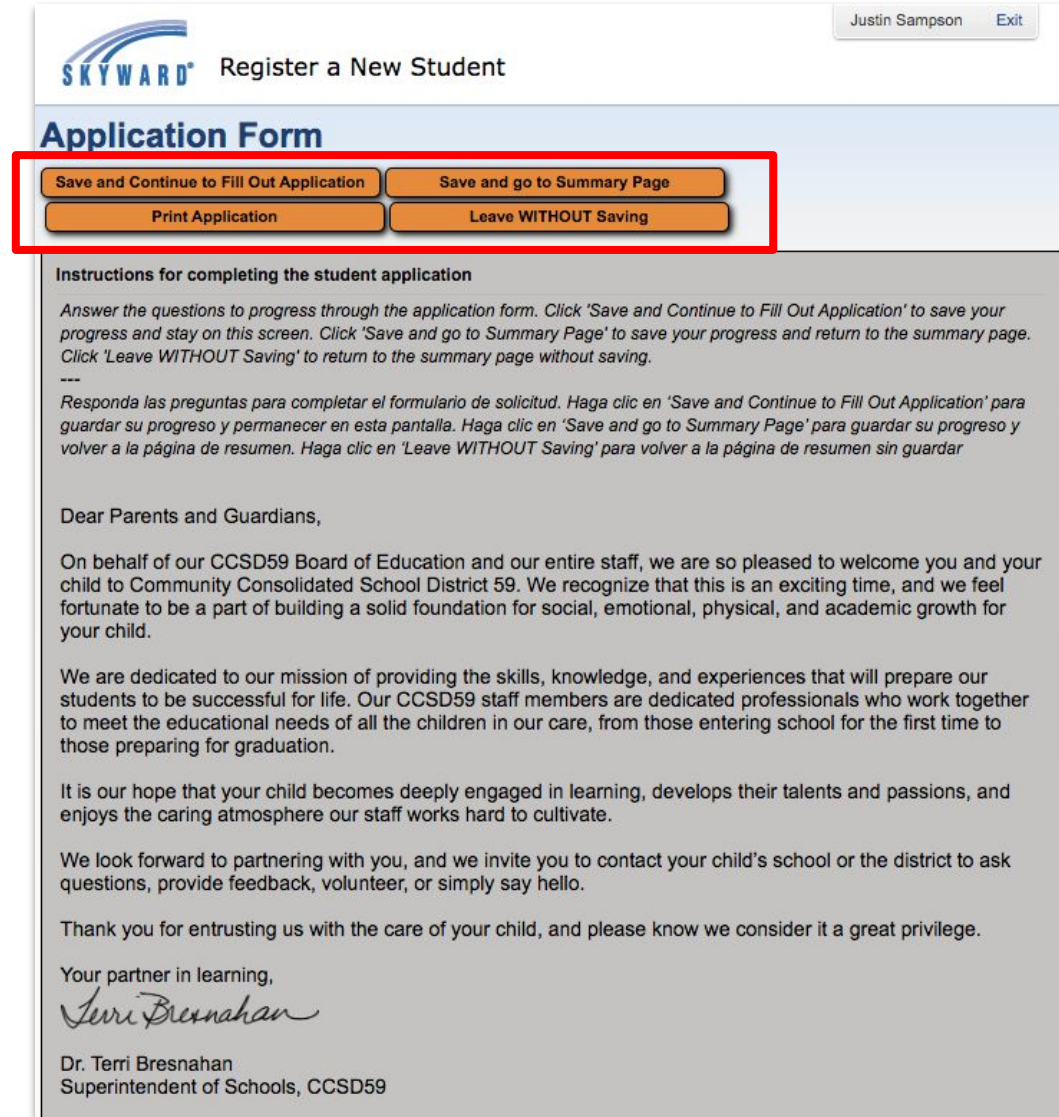


***ELC families registering for Kindergarten also use this step.**

APPLICATION FORM

Once you log in, you will be brought to the Application Form. You will find a letter from the Superintendent and several orange buttons that allow you to save your progress, check the status of your submitted applications, print your application, or exit without saving.

Scroll down to continue.



SKYWARD® Register a New Student

Justin Sampson Exit

Application Form

[Save and Continue to Fill Out Application](#)[Save and go to Summary Page](#)

[Print Application](#)[Leave WITHOUT Saving](#)

Instructions for completing the student application

Answer the questions to progress through the application form. Click 'Save and Continue to Fill Out Application' to save your progress and stay on this screen. Click 'Save and go to Summary Page' to save your progress and return to the summary page. Click 'Leave WITHOUT Saving' to return to the summary page without saving.

Responda las preguntas para completar el formulario de solicitud. Haga clic en 'Save and Continue to Fill Out Application' para guardar su progreso y permanecer en esta pantalla. Haga clic en 'Save and go to Summary Page' para guardar su progreso y volver a la página de resumen. Haga clic en 'Leave WITHOUT Saving' para volver a la página de resumen sin guardar

Dear Parents and Guardians,

On behalf of our CCSD59 Board of Education and our entire staff, we are so pleased to welcome you and your child to Community Consolidated School District 59. We recognize that this is an exciting time, and we feel fortunate to be a part of building a solid foundation for social, emotional, physical, and academic growth for your child.

We are dedicated to our mission of providing the skills, knowledge, and experiences that will prepare our students to be successful for life. Our CCSD59 staff members are dedicated professionals who work together to meet the educational needs of all the children in our care, from those entering school for the first time to those preparing for graduation.

It is our hope that your child becomes deeply engaged in learning, develops their talents and passions, and enjoys the caring atmosphere our staff works hard to cultivate.

We look forward to partnering with you, and we invite you to contact your child's school or the district to ask questions, provide feedback, volunteer, or simply say hello.

Thank you for entrusting us with the care of your child, and please know we consider it a great privilege.

Your partner in learning,
Terri Bresnahan

Dr. Terri Bresnahan
Superintendent of Schools, CCSD59

APPLICATION FORM (CONTINUED)

At the bottom of the screen, you will find five steps to complete.
Click the **Edit** button to expand these step menus and type in your information.



Asterisk (*) denotes a required field Please Note: Only one step may be edited at a time

Step 1: Student Information **Edit** **View Only**

Step 2: Family/Guardian Information **Edit** **View Only**

Step 3: Emergency Contact Information **Edit** **View Only**

Step 4: Requested Documents **Edit** **View Only**

Step 5: Additional District Forms **Edit** **View Only** *All prior steps must be completed to edit or view this step.*

APPLICATION FORM (STEP 1)

After Step 1 expands, begin putting in your child's information. The first day of the 2023-24 school year is listed as a guide if that is your child's expected enrollment date.

Once finished, you can click "Complete Step 1 and move to Step 2: Family/Guardian Information" to continue with the process, or click "Complete Step 1 Only" to save your work and come back later

Asterisk (*) denotes a required field Please Note: Only one step may be edited at a time

Step 1: Student Information Edit View Only Save Save and Collapse Step

Instructions for completing Student Information
Información del estudiante

* Last Name/Apellido: * First Name/Nombre: Middle Name/Segundo nombre:
Name Suffix/Sufijo de nombre: Nickname/Apodo: * Gender/Sexo:

* Date of Birth/Fecha de nacimiento: Age: * Birth City/Ciudad de nacimiento: * Birth State/Estado de nacimiento:

* Birth Country/Pais de nacimiento:

* Is Student Hispanic/Latino? / El estudiante es hispano/latino?:

* Federal Race/Raza federal: (select all that apply)
☐ American Indian or Alaska Native / Indio americano o Nativo de Alaska
☐ Asian / Asiático
☐ Black or African American / Negro o Afroamericano
☐ Native Hawaiian or Other Pacific Islander / Hawai u otra isla del Pacifico
☐ White / Blanco

* Language Spoken Most/Idioma mas hablado: * Native Language/Idioma materno:

* Language Spoken at Home/Idioma hablado en casa:

☐ Military Connected/Conectados con el servicio militar ?
☐ Has student attended a school in Illinois? / El estudiante ha asistido a una escuela en Illinois?
☐ Has student attended District 59 previously? / El estudiante ha asistido previamente al Distrito 59?

Previous School District attended/Distrito escolar anterior al que asistió: Name of previous school/pre-school/day care attended/Nombre de la escuela/preescolar/guardería anterior a la que asistió:

You are enrolling your student into the **Current School Year (2022 - 2023)**
* Expected Enrollment Date/Fecha de inscripción prevista: (The first day of school is 08/18/2022)
Expected Grade Level/Nivel de grado esperado: Expected School to Enroll into/Escuela prevista para inscribirse en:

☐ Do you have internet access? / Tiene acceso a internet?
Additional Information (on the Student for the District):
Maximum characters: 5000, Remaining characters: 5000

Complete Step 1 and move to Step 2: Family/Guardian Information **Complete Step 1 Only**

APPLICATION FORM (STEP 2)

In Step 2, enter the information of every parent or guardian that you would like to be tied to the child's student profile in Skyward **who lives at the primary address listed.**

When you complete the first parent/guardian, click “Yes, I want to Add another Legal Guardian who lives at this address” to repeat the process, or “No other Legal Guardians live at this Address” to continue.

Step 2: Family/Guardian Information [Edit] [View Only] [Save] [Save and Collapse Step]

Instructions for completing Family/Guardian Information
Informacion de la familia/tutor

Enter Information for the Primary Guardian and the Family this Student lives with

Enter Information for the Family this Student lives with

* Primary Phone/Telefono principal: 847-593-4300 ☐ Should the District keep this number confidential?/Debe el Distrito mantener este numero confidencial?

☐ Print Hard Copy Report Cards/Imprimir boletas de calificaciones impresas

House #: 1003 Street Name: Leicester SUD: #:

Home Address/Domicilio: P.O. Box: Address 2: City: State: Zip Code: 60007

Dwelling/Vivienda:

Enter Information for the Primary Guardian of the Family this Student lives with

* Last Name/Apellido: * First Name/Nombre: Middle Name/Segundo nombre:

Name Suffix/Sufijo de nombre: Name Prefix/Prefijo de nombre:

* Relationship to Child/Relacion con el niño:

* Does this guardian have custody of the child?/Este tutor tiene la custodia del niño?: No ☐ * Is this guardian allowed to pick up the student from school?/Se le permite a este tutor recoger al estudiante de la escuela?: No ☐

☐ Should this guardian also be considered an Emergency Contact?/Deberia este tutor tambien ser considerado un contacto de emergencia?

Cell Phone/Telefono celular: Work Phone/Telefono del trabajo: Contact Email Address/Direccion de correo electronico de contacto: info@ccsd59.org

Language:

Are there other Legal Guardians who live at this address?

Yes, I want to Add another Legal Guardian who lives at this address **No other Legal Guardians live at this Address**

APPLICATION FORM (STEP 2 - continued)

You should now receive a prompt to either add a legal guardian at a different address if that option applies. Otherwise, you can complete Step 2 and proceed, or complete Step 2, save your work, and return later.

The screenshot displays a web form interface. The first section, titled "Are there other Legal Guardians who live at this address?", contains a single button: "Yes, I want to Add another Legal Guardian who lives at this address". The second section, titled "Are there other Legal Guardians who live at a different address?", contains three buttons: "Yes, I want to Add a Legal Guardian who lives at a Different Address", "No, Complete Step 2 and move to Step 3: Emergency Contact Information", and "No, Complete Step 2 Only". Two red arrows originate from the text above; one points to the "No, Complete Step 2 and move to Step 3: Emergency Contact Information" button, and the other points to the "No, Complete Step 2 Only" button. Below these sections is a header for "Step 3: Emergency Contact Information" with "Edit" and "View Only" buttons.

Are there other Legal Guardians who live at this address?

Yes, I want to Add another Legal Guardian who lives at this address

Are there other Legal Guardians who live at a different address?

Yes, I want to Add a Legal Guardian who lives at a Different Address No, Complete Step 2 and move to Step 3: Emergency Contact Information No, Complete Step 2 Only

Step 3: Emergency Contact Information Edit View Only

APPLICATION FORM (STEP 3)

Step 3 allows you to add Emergency Contact information if you wish. If you do not need this option, simply click “No, Complete Step 3 and move to Step 4: Requested Documents” to continue or “No, Complete Step 3 only” to save your work and return later.



The screenshot shows the 'Step 3: Emergency Contact Information' form. At the top, there are four buttons: 'Edit', 'View Only', 'Save', and 'Save and Collapse Step'. Below these is a grey box containing the text 'Instructions for completing Emergency Contact Information' and 'Informacion de contacto de emergencia'. The main question is 'Do you have other Emergency Contacts to add for this student?'. At the bottom, there are three buttons: 'Yes, I want to Add another Emergency Contact Record', 'No, Complete Step 3 and move to Step 4: Requested Documents', and 'No, Complete Step 3 Only'. Two red arrows originate from the text above: one points to the 'No, Complete Step 3 and move to Step 4: Requested Documents' button, and the other points to the 'No, Complete Step 3 Only' button.

Step 3: Emergency Contact Information

Instructions for completing Emergency Contact Information
Informacion de contacto de emergencia

Do you have other Emergency Contacts to add for this student?

APPLICATION FORM (STEP 3 - continued)

If you choose to add an emergency contact, clicking that option will expand this menu, where you can put in the information for each emergency contact you desire. Once finished, you can complete Step 3 and continue, or complete Step 3, save your work, and return later.

Step 3: Emergency Contact Information Edit View Only Save Save and Collapse Step

Instructions for completing Emergency Contact Information
Informacion de contacto de emergencia

Enter the Information for Emergency Contact #1 Remove this Emergency Contact

* Last Name/Apellido: * First Name/Nombre: Name Suffix/Sufijo de nombre:

Name Prefix/Prefijo de nombre: ☐ Is this contact allowed to pick up the student from school?/Se permite este contacto recoger al estudiante de la escuela?

Language/Idioma:

Contact Email Address/Direccion de correo electronico de contacto: Primary Phone/Telefono principal: Cell Phone/Telefono celular.:

Work Phone/Telefono del trabajo:

Relationship to Child/Relacion con el niño: Relationship Comment/Comentario de la relacion:

Do you have other Emergency Contacts to add for this student?

Yes, I want to Add another Emergency Contact Record No, Complete Step 3 and move to Step 4: Requested Documents No, Complete Step 3 Only

APPLICATION FORM (STEP 4)

Step 4 is where you provide the child's birth certificate as well as your proof of residency. You can find a list of acceptable documents to prove residency here:

- [English](#) | [Spanish](#)

You can upload scans, PDFs, or jpg files of these documents by using the Choose File button at the bottom of Step 4.

You may complete the registration process even if you do not have the documents, but registration for your child will not be approved before you provide these documents.

Utilice los botones de 'Browse' para ubicar un archivo para cargar que corresponda a la descripción en la misma línea.
Si está disponible, por favor cargue los documentos requeridos para cada sección.

Sección 1 – Acta de nacimiento
Sección 2 – Residencia

Puede completar el proceso de inscripción incluso si no tiene los documentos en este momento, pero por favor tenga en cuenta que la inscripción de su hijo no será aprobado antes de que se proporcione esta documentación.

Por favor haga clic aquí para ver una lista de los documentos aceptados por el distrito para comprobar la residencia.
[Inglés / español](#)

FOR EARLY LEARNING CENTER STUDENTS ONLY / SOLO PARA ESTUDIANTES DEL EARLY LEARNING CENTER
Provide any options below that apply to you / Proporcione cualquier opción de los siguientes que se apliquen a usted

Public Benefits / Beneficios públicos:
WIC / Programa para mujeres, bebés y niños
Medicaid Card / Seguro médico estatal para personas de bajos ingresos
SNAP / Cupones para alimentos
TANF / Asistencia temporal para familias necesitadas
CCAP / Asistencia para el cuidado infantil Programa

Proof of Income / Comprobante de ingresos:
Paystubs (most recent) / Talones de pago (dos más recientes, consecutivos)
SSI
Tax Return / Declaración de impuestos
W-2 (most recent / más reciente)
Verification/letter from employer / Verificación / Carta del empleador

Use EC Proof of Income 1-4 below to provide the required documents / Use EC Proof of Income 1-4 a continuación para proporcionar los documentos requeridos

***Also complete EC-10 Proof of Income Form / También complete EC-10 Proof of Income Form (See Step 5)**

1 Proof of Residency:	<input type="button" value="Choose File"/>	No file chosen
2 Proof of Residency:	<input type="button" value="Choose File"/>	No file chosen
3 Proof of Residency:	<input type="button" value="Choose File"/>	No file chosen
Birth Certificate:	<input type="button" value="Choose File"/>	No file chosen
EC Proof of Income 1:	<input type="button" value="Choose File"/>	No file chosen
EC Proof of Income 2:	<input type="button" value="Choose File"/>	No file chosen
EC Proof of Income 3:	<input type="button" value="Choose File"/>	No file chosen
EC Proof of Income 4:	<input type="button" value="Choose File"/>	No file chosen

APPLICATION FORM (STEP 4 - continued)

If you are registering a Pre-K student, you will also need to provide proof of income.

The same parameters for uploading apply: you can upload scans, PDFs, or jpg files of these documents by using the Choose File button at the bottom of Step 4.

You may also complete the registration process even if you do not have these documents, but registration for your child will not be approved before you provide these documents.

Utilice los botones de 'Browse' para ubicar un archivo para cargar que corresponda a la descripción en la misma línea.
Si está disponible, por favor cargue los documentos requeridos para cada sección.

Sección 1 – Acta de nacimiento
Sección 2 – Residencia

Puede completar el proceso de inscripción incluso si no tiene los documentos en este momento, pero por favor tenga en cuenta que la inscripción de su hijo no será aprobado antes de que se proporcione esta documentación.

Por favor haga clic aquí para ver una lista de los documentos aceptados por el distrito para comprobar la residencia.
[Inglés / español](#)

FOR EARLY LEARNING CENTER STUDENTS ONLY / SOLO PARA ESTUDIANTES DEL EARLY LEARNING CENTER
Provide any options below that apply to you / Proporcione cualquier opción de los siguientes que se apliquen a usted

Public Benefits / Beneficios públicos:
WIC / Programa para mujeres, bebés y niños
Medicaid Card / Seguro médico estatal para personas de bajos ingresos
SNAP / Cupones para alimentos
TANF / Asistencia temporal para familias necesitadas
CCAP / Asistencia para el cuidado infantil Programa

Proof of Income / Comprobante de ingresos:
Paystubs (most recent) / Talones de pago (dos más recientes, consecutivos)
SSI
Tax Return / Declaración de impuestos
W-2 (most recent / más reciente)
Verification/letter from employer / Verificación / Carta del empleador

Use EC Proof of Income 1-4 below to provide the required documents / Use EC Proof of Income 1-4 a continuación para proporcionar los documentos requeridos

***Also complete EC-10 Proof of Income Form / También complete EC-10 Proof of Income Form (See Step 5)**

1 Proof of Residency:	<input type="button" value="Choose File"/>	No file chosen
2 Proof of Residency:	<input type="button" value="Choose File"/>	No file chosen
3 Proof of Residency:	<input type="button" value="Choose File"/>	No file chosen
Birth Certificate:	<input type="button" value="Choose File"/>	No file chosen
EC Proof of Income 1:	<input type="button" value="Choose File"/>	No file chosen
EC Proof of Income 2:	<input type="button" value="Choose File"/>	No file chosen
EC Proof of Income 3:	<input type="button" value="Choose File"/>	No file chosen
EC Proof of Income 4:	<input type="button" value="Choose File"/>	No file chosen

APPLICATION FORM (STEP 5)

Step 5 features consent forms that you are required to read and sign for your child. You can click on each orange button to bring up that form to read and sign.

If you are registering a Pre-K student, EC-10 Form will also appear in this section for you to complete.

Step 5: Additional District Forms [Edit](#) [View Only](#) [Save](#) [Save and Collapse Step](#)

Instructions for completing the Additional District Forms
The buttons below each link to an additional form that must be completed to be able to submit the student application.

Los botones debajo de cada enlace a un formulario adicional que debe completarse para poder enviar la solicitud de estudiante.

Asterisk (*) denotes a required form

If your child has attended any school prior to this school year, please complete this form so that CCSD59 can receive the applicable records from the student's former educational institution. Si su hijo ha asistido a alguna escuela antes de este año escolar, complete este formulario para que CCSD59 pueda recibir los registros correspondientes de la institución educativa anterior del estudiante.

Optional Form:	NSOE SR-9 Auth for Release/Exchange of Info 23	<input type="checkbox"/> This form has not been completed
* Required Form:	NSOE H-103 Health Form 23	<input type="checkbox"/> This form has not been completed
* Required Form:	NSOE Parent Consent 23	<input type="checkbox"/> This form has not been completed
* Required Form:	NSOE SR-12 Home Language Survey 23	<input type="checkbox"/> This form has not been completed
* Required Form:	NSOE 2 Info 23	<input type="checkbox"/> This form has not been completed

[Complete Step 5](#)

APPLICATION FORM (STEP 5 - continued)

These forms cover:

- Authorization for Release/Exchange of Information
- Student Health Form
- Parent Consent Forms
- Some of these will require a “Yes” or “No” from a dropdown box
- Home Language Survey
- Other Information Forms

Once you have checked or filled out each appropriate box, click “Save” at the top right of the screen to continue. Do this for all five forms.

**Note: In the NSOE Info Form, health, dental, and vision forms are available to print, complete, and return to your child’s school at a later date*

Name: Justin Sampson Gender: Male

DO NOT SEND ORIGINAL RECORDS - COPIES ONLY

COMMUNITY CONSOLIDATED SCHOOL DISTRICT 59
1001 Leicester Road | Elk Grove Village, IL 60007 Ph: (847) 593-4306 | Fax: (847) 593-4352

AUTHORIZATION FOR RELEASE/EXCHANGE OF INFORMATION
AUTORIZACIÓN PARA INTERCAMBIAR ARCHIVOS Y/O INFORMACIÓN

Student Name / Nombre del estudiante: Justin Sampson Date of Birth / Fecha de nacimiento: 02/02/2015
Previous school or Agency Releasing Records / Antes de escuela o Agencia Anterior:
Address/City/ST/Zip / Dirección/Ciudad/Estado/Código Postal:
☐ I/we hereby authorize that the following information will be released/exchanged to Community Consolidated School District 59. I understand that I have the right to inspect and copy the information to be disclosed, challenge its contents, and limit my consent to designated records or portions of the information contained in those records. I also understand that my refusal to consent to the exchange of records and communications could result in incomplete and/or inappropriate educational planning for the student. This consent expires one year from the date indicated below. However, I understand that I have the right to revoke this consent in writing at any time.

Por la presente, autorizo/autorizamos que se divulgue y/o intercambie la siguiente información a Community Consolidated School District 59. Entiendo que tengo derecho a inspeccionar y copiar la información que se divulgará, así como cuestionar el contenido y limitar mi consentimiento a archivos designados o porciones de la información contenida en los archivos. También entiendo que mi negativa a consentir el intercambio de archivos y comunicaciones podría resultar en una planificación educativa incompleta y/o inapropiada para el estudiante. Este consentimiento expira al cabo de un año a partir de la fecha indicada abajo. Sin embargo, entiendo que tengo el derecho a revocar este consentimiento por escrito en cualquier momento.

☐ All permanent and temporary records including, but not limited to, basic identifying information, birth certificate or other proof of student's identity, academic transcript, attendance records, scores on State Assessments administered in grades K-8, discipline records, health-related information, psychological evaluation reports, aptitude and achievement test results, report cards, progress monitoring information, IDEA/special education records, and Section 504 records.

Todos los archivos permanentes incluyendo, entre otros, información básica de identificación, acta de nacimiento o cualquier otra prueba de la identidad del estudiante, transcripción de créditos académicos, resultados de las pruebas estatales administradas en los grados K-8, registro de disciplina, información de salud, registro de accidentes, información familiar, informes de evaluaciones psicológicas, resultados de prueba de aptitud y aprovechamiento, informes de calificaciones, archivos de educación especial y/o Ley IDEA, y archivos de Sección 504.

PRE-ELEMENTARY SCHOOL/ PREESCOLAR

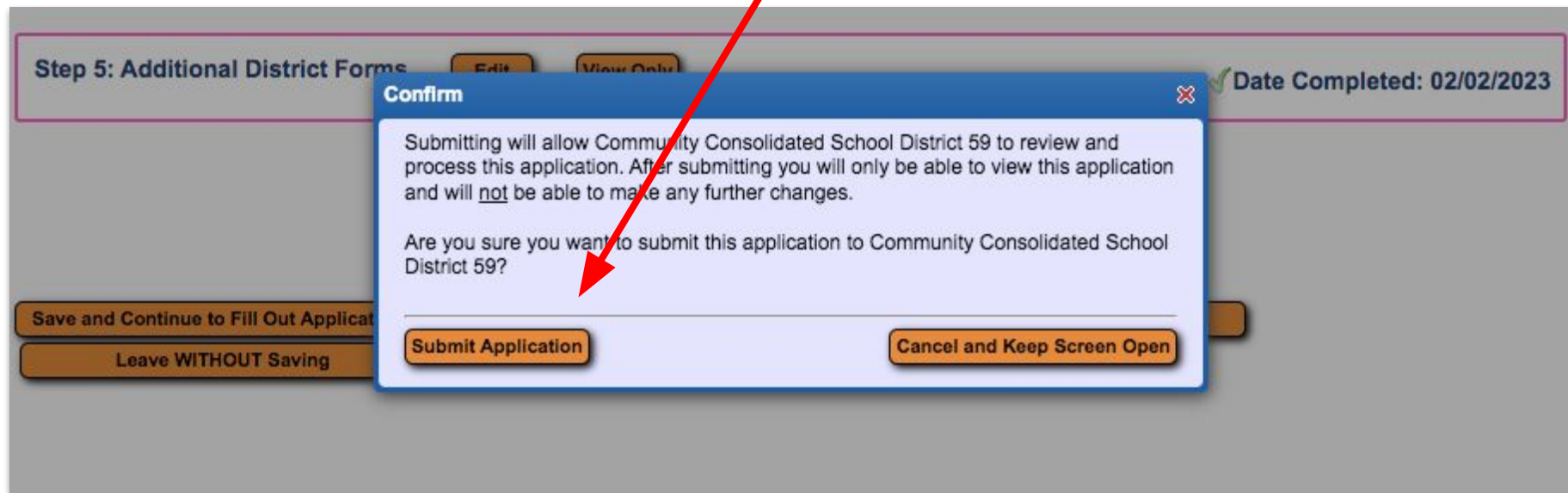
<input type="checkbox"/>	Early Learning Center, 1900 Lonnquist Blvd, Mount Prospect, IL 60056	P: (847) 593-4306	F: (847) 593-7199
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ELEMENTARY SCHOOLS/ ESCUELAS PRIMARIAS

<input type="checkbox"/>	Brentwood, 260 Dulles Rd, Des Plaines, IL 60016	P: (847) 593-4401	F: (847) 593-7184
<input type="checkbox"/>	Admiral Byrd, 265 Wellington Ave, Elk Grove Village, IL 60007	P: (847) 593-4388	F: (847) 593-7188
<input checked="" type="checkbox"/>	Clearmont, 280 Clearmont Dr, Elk Grove Village, IL 60007	P: (847) 593-4372	F: (847) 593-7194
<input type="checkbox"/>	Devonshire, 1401 S. Pennsylvania Ave, Des Plaines, IL 60018	P: (847) 593-4398	F: (847) 593-7183
<input type="checkbox"/>	Forest View, 1901 Estates Dr, Mount Prospect, IL 60056	P: (847) 593-4359	F: (847) 593-4360
<input type="checkbox"/>	Robert Frost, 1308 S Cypress Dr, Mount Prospect, IL 60056	P: (847) 593-4378	F: (847) 593-4365
<input type="checkbox"/>	John Jay, 1835 Pheasant Trl, Mount Prospect, IL 60056	P: (847) 593-4385	F: (847) 593-8656
<input type="checkbox"/>	Juliette Low, 1530 Highland Ave, Arlington Heights, IL 60005	P: (847) 593-4383	F: (847) 593-7291
<input type="checkbox"/>	Ridge Family Center for Learning, 650 Ridge Ave, Elk Grove Village, IL 60007	P: (847) 593-4070	F: (847) 593-4075

APPLICATION FORM (CONTINUED)

Once you complete Step 5, click “Submit Application to District”. If you are sure you are finished with your application, click “Submit Application” from the pop-up window to finish.



The screenshot displays the 'Step 5: Additional District Forms' section of an application form. At the top right, it indicates 'Date Completed: 02/02/2023'. Below the title bar, there are buttons for 'Edit' and 'View Only'. A confirmation pop-up window is centered on the screen, titled 'Confirm'. The pop-up contains the following text: 'Submitting will allow Community Consolidated School District 59 to review and process this application. After submitting you will only be able to view this application and will not be able to make any further changes.' followed by the question 'Are you sure you want to submit this application to Community Consolidated School District 59?'. At the bottom of the pop-up are two buttons: 'Submit Application' and 'Cancel and Keep Screen Open'. A red arrow points from the text 'click “Submit Application” from the pop-up window' in the instructions above to the 'Submit Application' button in the pop-up. In the background, below the pop-up, are buttons for 'Save and Continue to Fill Out Application' and 'Leave WITHOUT Saving'.

ADDITIONAL RESOURCES

[CCSD59 Registration Page](#)