

PARENTS' GUIDE TO DIGITAL RE-ENROLLMENT

The Leona Group (TLG) schools in Michigan have implemented an online, paperless Re-Enrollment process that parents/guardians can access directly from their PowerSchool Parent account. These forms are available online and may be filled out at your convenience, from the comfort of your own home, making them completely safe and secure.

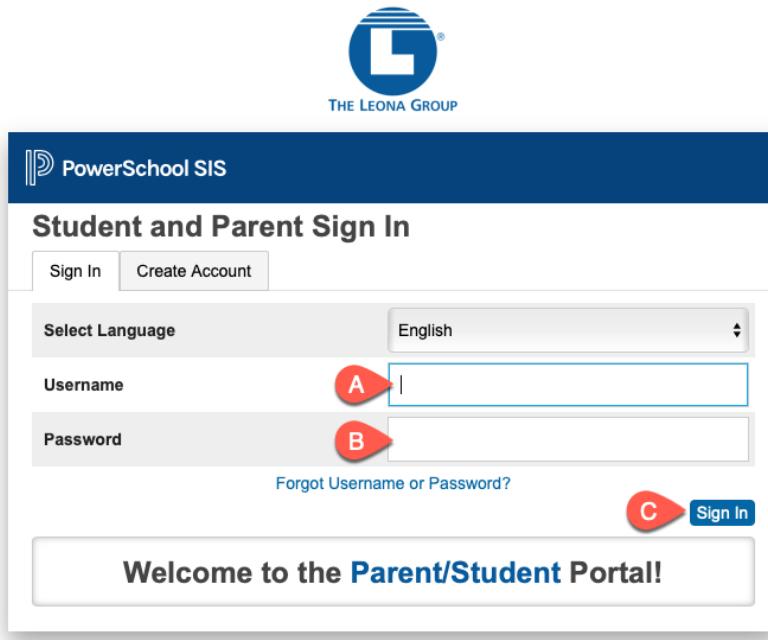
The Re-Enrollment process consists of two parts:

- Part 1: indicate your intention (Yes or No) to have your child re-enroll in the school for the upcoming year -- **this is a required form**
- Part 2: if your child will be returning next year, some student information may be updated if needed (such as home address, phone, contact information, etc). These forms are optional at this time, and may be made available between now and the start of school

ACCESSING THE RE-ENROLLMENT FORMS

Re-enrollment forms are accessed from your PowerSchool Parent account. No separate login is necessary.

STEP 1: Log into your PowerSchool Parent Portal account.



PowerSchool SIS

Student and Parent Sign In

Sign In Create Account

Select Language English

Username A

Password B

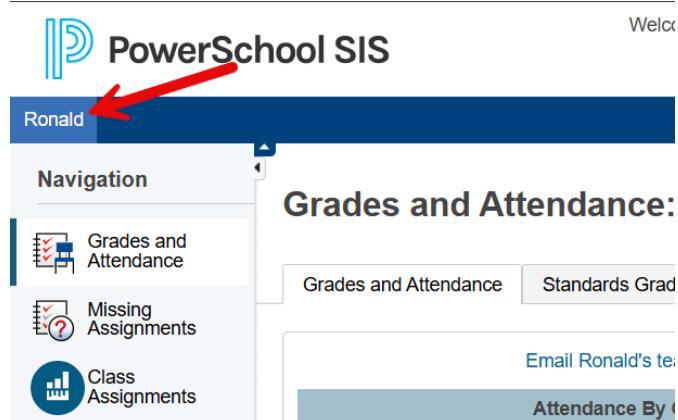
Forgot Username or Password?

C Sign In

Welcome to the Parent/Student Portal!

<https://tlgmi.powerschool.com>

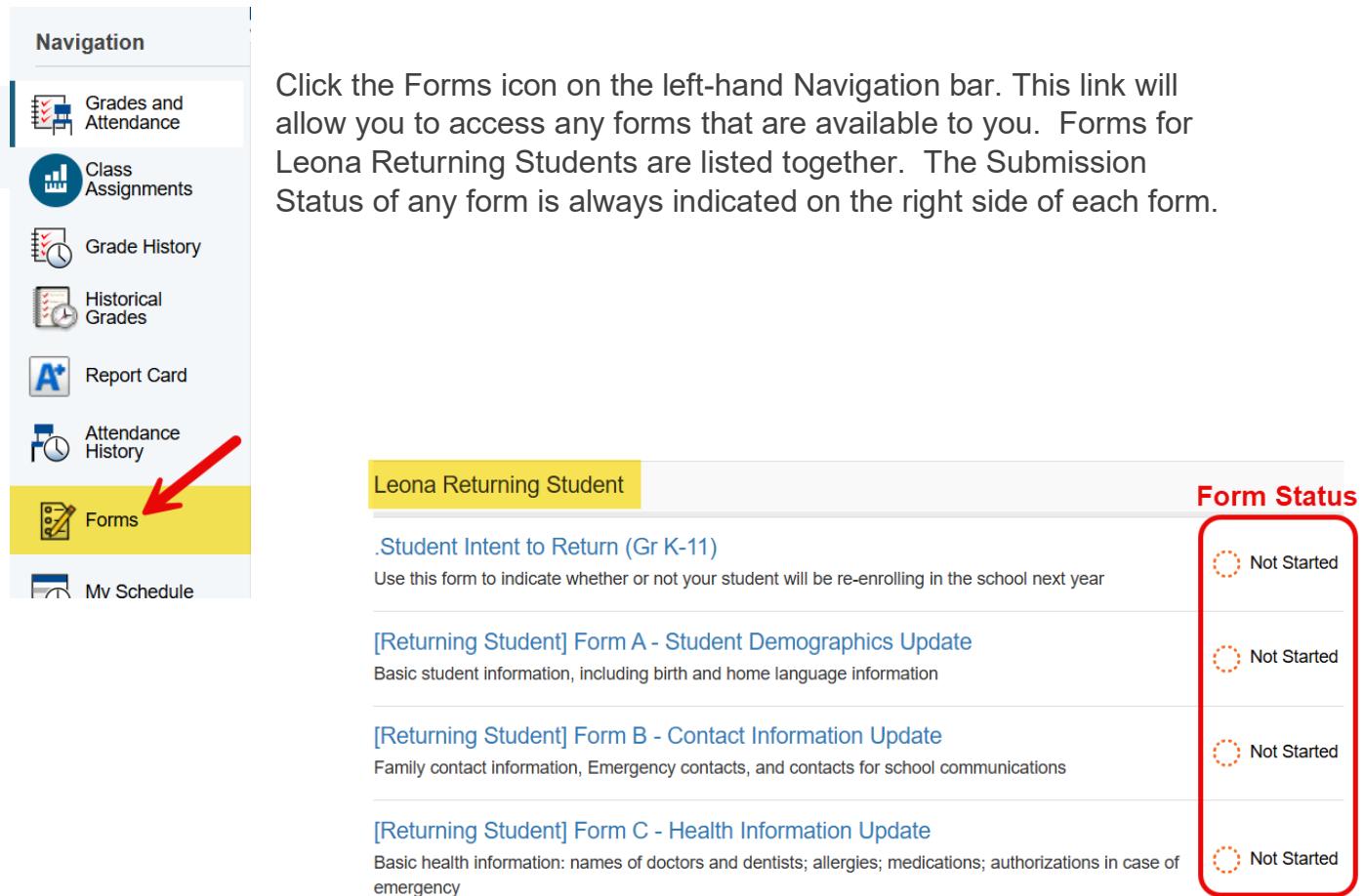
STEP 2: Select the name of the student from the ribbon on the top.



The screenshot shows the PowerSchool SIS interface. At the top, there is a blue ribbon with the student's name, 'Ronald'. Below the ribbon, the 'Navigation' sidebar is visible with icons for Grades and Attendance, Missing Assignments, and Class Assignments. The main content area is titled 'Grades and Attendance' and includes tabs for 'Grades and Attendance' and 'Standards Grad'. There are also buttons for 'Email Ronald's teacher' and 'Attendance By Day'.

If your Parent Portal account is linked to more than one student, each name will appear on the ribbon. Forms are available for each student.

STEP 3: Access the Forms page

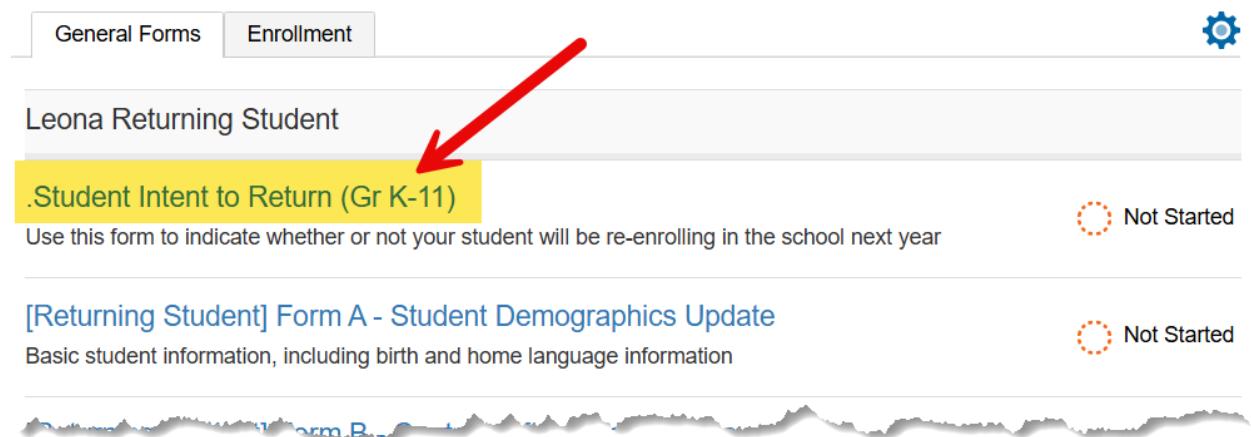


The screenshot shows the 'Forms' page. The left sidebar has a yellow highlight on the 'Forms' icon, which is also highlighted with a red arrow. The main content area shows a section for 'Leona Returning Student' with a yellow background. It includes a form titled '[Student Intent to Return (Gr K-11)]' with a description: 'Use this form to indicate whether or not your student will be re-enrolling in the school next year'. Below this are three more forms: '[Returning Student] Form A - Student Demographics Update', '[Returning Student] Form B - Contact Information Update', and '[Returning Student] Form C - Health Information Update'. To the right of these forms is a 'Form Status' column with four entries, each marked with a red circle and the text 'Not Started'.

Part 1: Complete Student Intent to Return (Required)

Begin by clicking the **Student Intent to Return** form from the Leona Returning Student list.

School Form Listing



General Forms Enrollment

Leona Returning Student

.Student Intent to Return (Gr K-11)

Use this form to indicate whether or not your student will be re-enrolling in the school next year

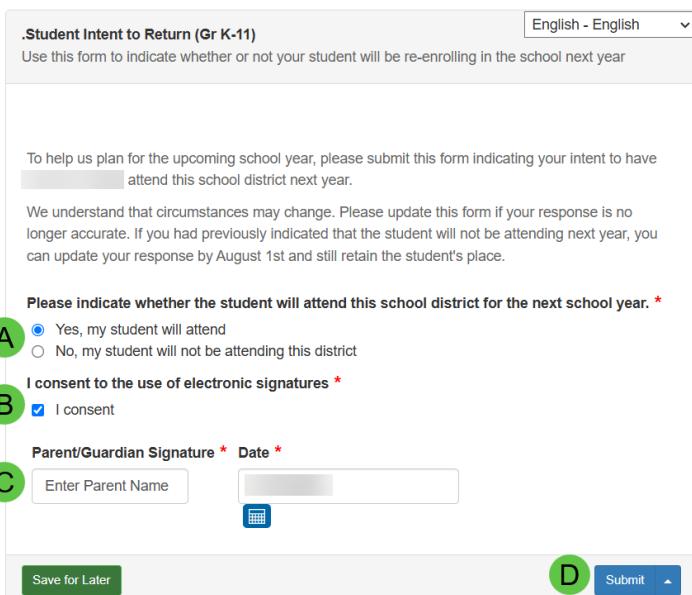
Not Started

[Returning Student] Form A - Student Demographics Update

Basic student information, including birth and home language information

Not Started

On the Student Intent to Return form:



.Student Intent to Return (Gr K-11)

English - English

Use this form to indicate whether or not your student will be re-enrolling in the school next year

To help us plan for the upcoming school year, please submit this form indicating your intent to have attend this school district next year.

We understand that circumstances may change. Please update this form if your response is no longer accurate. If you had previously indicated that the student will not be attending next year, you can update your response by August 1st and still retain the student's place.

A Please indicate whether the student will attend this school district for the next school year. *

Yes, my student will attend
 No, my student will not be attending this district

B I consent to the use of electronic signatures *

I consent

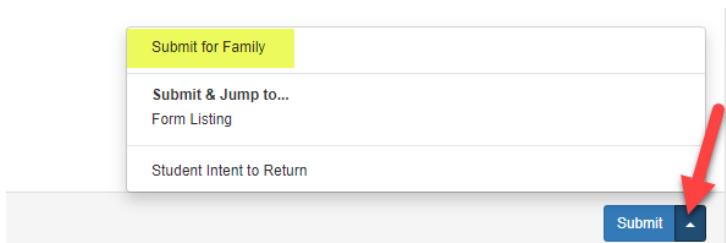
C Parent/Guardian Signature * Date *

Enter Parent Name

D

NOTE: there is an option to Submit for Family if the same response applies to all the students connected to this account

- A. Indicate whether the student will be attending the school next year (Yes or No)
- B. Consent to electronic signature
- C. Enter YOUR Name and the Date
- D. Submit the form



Submit for Family

Submit & Jump to...
Form Listing

Student Intent to Return

Submit



You will receive a Thank You message if the form has been submitted successfully.

Thank You!

Your intention to have your child re-enroll in the school (or not) has been saved. If the intention is to re-enroll your student, please complete / update the forms on the Enrollment tab.

OK

The Student Intent to Return Form now shows as Submitted on the forms list:

Leona Returning Student

[.Student Intent to Return \(Gr K-11\)](#)

Use this form to indicate whether or not your student will be re-enrolling in the school next year

Last Entry:



Submitted

[\[Returning Student\] Form A - Student Demographics Update](#)



Not Started

Part 2: Complete Returning Students Enrollment Forms (Optional)

Click on any of the Leona Returning Student forms to update information about your student.

School Form Listing

General Forms

Enrollment



Leona Returning Student

[.Student Intent to Return \(Gr K-11\)](#)

Use this form to indicate whether or not your student will be re-enrolling in the school next year

Submitted

Last Entry: 01/30/2026 08:41:51 AM

[\[Returning Student\] Form A - Student Demographics Update](#)

Basic student information, including birth and home language information

Not Started

[\[Returning Student\] Form B - Contact Information Update](#)

Family contact information, Emergency contacts, and contacts for school communications

Not Started

[\[Returning Student\] Form C - Health Information Update](#)

Basic health information: names of doctors and dentists; allergies; medications; authorizations in case of emergency

Not Started

Form A – Student Demographics

[Returning Student] Form A - Student Demographics Update English - English

Basic student information, including birth and home language information

Student Profile

Currently on Record Corrections

Does this information need to be updated? *

Yes No

Name	First Name *	Last Name *
Middle Name	Suffix	
Preferred Name		
Gender Female	Female	
Date of Birth		
Student's Cell Phone	XXX-XXX-XXXX	
Student's Email		
Is the student Hispanic or Latino? No	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Race/Ethnicity		
<input checked="" type="checkbox"/> Black or African American		
Siblings Please list siblings		
Add Row		

Language

Currently on Record Corrections

Does this information need to be updated? *

Yes No

Language student uses at home	
Language you speak to student at home	
Language for school communications	

Submit

This form contains student information that is currently contained in PowerSchool.

The information found here generally remains the same from year to year: such as Date of Birth, Gender, Race/Ethnicity.

If any information needs to be updated or corrected, click the Yes button and fill in the correct information on the right side.

Update the Language Section (such as Home Language) if needed (or missing).

Click Submit to update information.

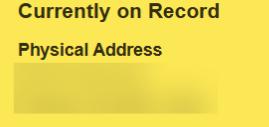
Form B - Contact Information Update

[Returning Student] Form B - Contact Information Update
Family contact information, Emergency contacts, and contacts for school communications

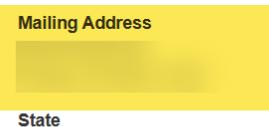
English - English

Address

Currently on Record

Physical Address 

State

Mailing Address 

State

Home Phone 

Corrections 

Street

City

Zip Code

Street

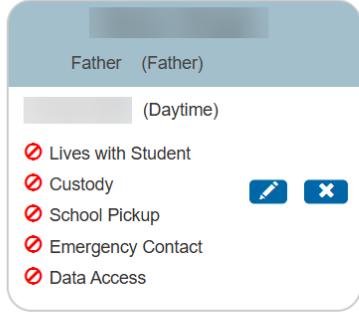
City

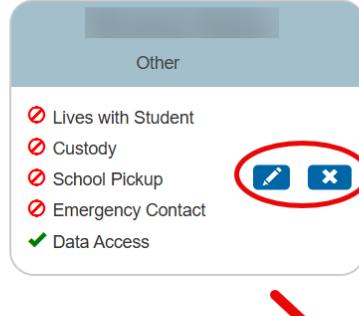
Zip Code

Student Contacts

This is a listing of all the contacts that the student has. Please update any of this information that is not correct or accurate

Contact Management





This form displays current contact information for this student contained in PowerSchool.

If any information needs to be updated, enter the corrections in the fields on the right side of the page.

The Contacts for this student will be displayed here.

New Contacts may be added by clicking the Add button. Fill in the contact's information on the Pop-up Window. The order of contacts may be organized, as well.

Contact information may be updated by clicking the pencil icon, or they may be deleted by clicking the X icon.

Click Submit at the bottom of the page.

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Form C - Health Information Update

[Returning Student] Form C - Health Information Update English - English

Basic health information: names of doctors and dentists; allergies; medications; authorizations in case of emergency

Medical Contacts

Currently on Record	Corrections
Doctor	Doctor's Name <input type="text"/>
Dentist	Doctor's Phone <input type="text" value="XXX-XXX-XXXX"/>
Preferred Hospital	Dentist's Name <input type="text"/>
Child currently has health insurance	Dentist's Phone <input type="text" value="XXX-XXX-XXXX"/>
No	<input type="radio"/> Yes <input type="radio"/> No

Medical History

Currently on Record	Corrections
Does the student have allergies?	<input type="radio"/> Yes <input type="radio"/> No
No	
Does the student have asthma?	<input type="radio"/> Yes <input type="radio"/> No
No	

Medications
Medications
All medications to be administered during school hours must be listed here (including non-prescription medications).
Press the Add Row button to add additional medications.

Add Row

Authorizations

Consent To Emergency Treatment *
This is to certify that I, parent or guardian of [REDACTED], hereby grant permission for the adult supervisors of this activity to obtain medical care from any licensed physician, hospital or medical clinic for the student named herein at such time as either parent or guardian cannot be contacted in person or by phone. This authorization shall also include all activities, and we do hereby waive, release, absolve, indemnify, and agree to hold the activity sponsors, organizers, supervisors, and participants, for any claim arising out of injury to the student or accidents that may occur during the activity.

I agree I do not agree

Consent to Share Medical Information *
I give permission for the nurse to share necessary medical information with teacher(s)/staff as the nurse deems appropriate.

I agree I do not agree

Over-the-counter Medications
Please indicate which medications you are giving consent to be administered to [REDACTED] at school. Dosage given will be administered per age/weight instructions on medication container.

These medications will be administered on an as needed basis. All medications will be kept in the nurse's office. They may be given at the nurse's discretion, by the nurse or designated school personnel.

Acetaminophen * ex. Tylenol	Ibuprofen * ex. Motrin or Advil	Antihistamine * ex. Benadryl, Zyrtec, or Claritin
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Antacid * ex. TUMS	Antibiotic ointment * ex. Neosporin	Hydrocortisone cream * <input type="radio"/> Yes <input type="radio"/> No
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	

Cough drops or throat lozenges *

Yes
 No

Submit

This form displays current health information for this student.

If any information needs to be updated, enter the corrections in the fields on the right side of the page.

Some of this information is used for school purposes only, in the event of an emergency.

Click Submit at the bottom of the page.