



**TRITT**

**ONLINE REGISTRATION**

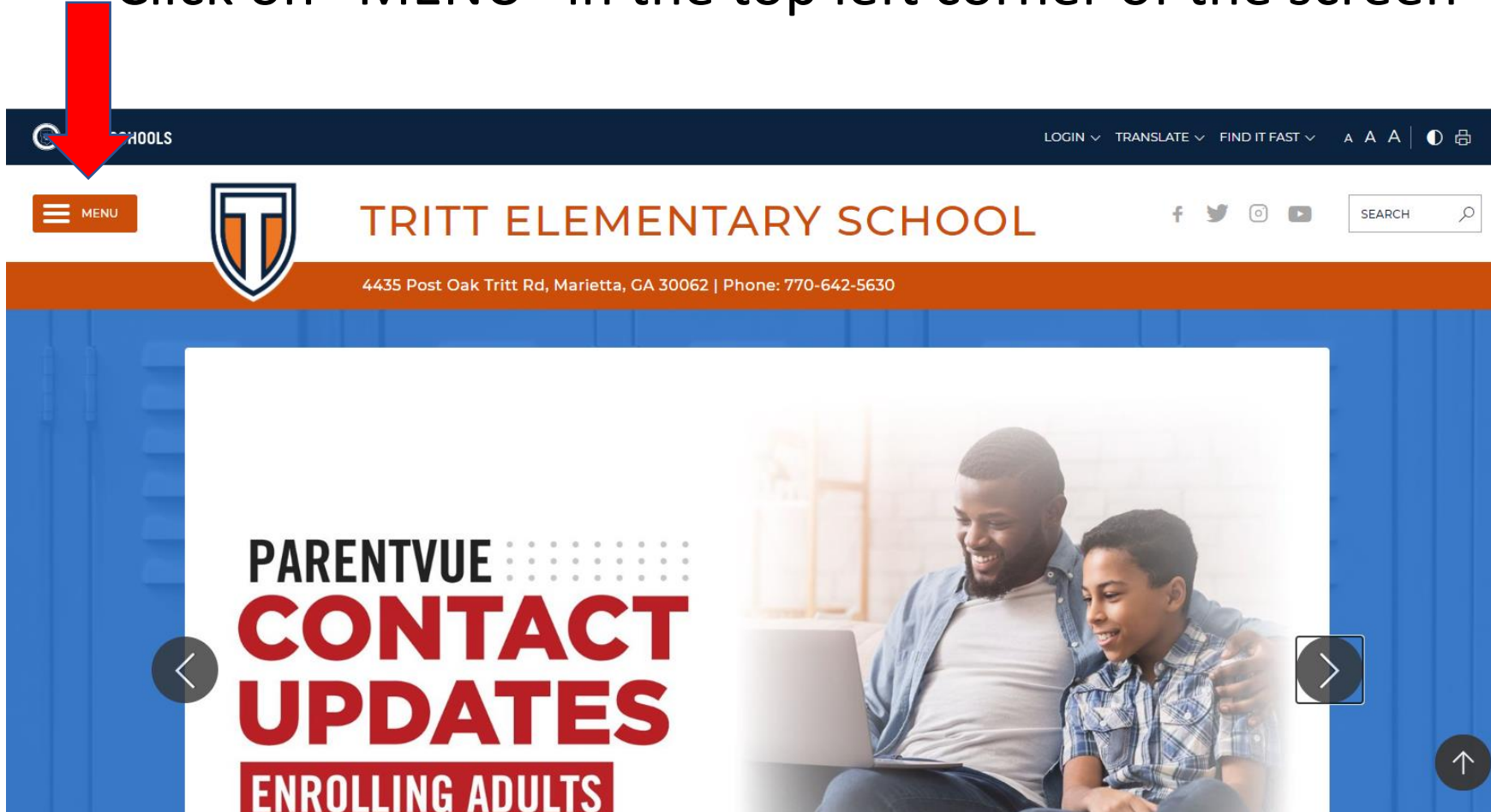


**TRITT**

**BEST PLACE TO  
START ONLINE  
REGISTRATION**





<https://web.cobbk12.org/tritt>

Click on "MENU" in the top left corner of the screen




The screenshot shows the website's header and main content area. At the top left, a red arrow points to a hamburger menu icon labeled "MENU". The header includes the school's name "TRITT ELEMENTARY SCHOOL" and a search bar. Below the header, a blue banner features the text "PARENTVUE CONTACT UPDATES ENROLLING ADULTS" and a photograph of a man and a boy looking at a laptop. Navigation arrows are visible on the banner.

SCHOOLS LOGIN ▾ TRANSLATE ▾ FIND IT FAST ▾ A A A | 🔍

**MENU**  **TRITT ELEMENTARY SCHOOL**     SEARCH 🔍

4435 Post Oak Tritt Rd, Marietta, GA 30062 | Phone: 770-642-5630

**PARENTVUE**   
**CONTACT UPDATES**  
**ENROLLING ADULTS**

◀ ▶ ⬆

Click on "Resources" and then on "Registration"

The image displays two screenshots of the Tritt Elementary School website. The top screenshot shows the main navigation menu on the left side, with a red arrow pointing to the 'Resources' link. The main content area features a banner for 'PARENTVUE CONTACT UPDATES ENROLLING ADULTS' with the text 'Update Student and/or Family Information Electronically'. The bottom screenshot shows the 'Resources' dropdown menu, with a red arrow pointing to the 'Registration' link. The dropdown menu also includes links for 'Communication & Social Media Accounts', 'Digital Resources', 'Kindergarten Information', 'Notes Home', and 'Schedules: 2022-2023'. The main content area in the bottom screenshot features a banner with the text 'THANK YOU TO OUR PARTNERS IN EDUCATION!'.

# FOLLOW DIRECTIONS AND LINKS ON REGISTRATION PAGE FOR YOUR SITUATION



TRITT ELEMENTARY SCHOOL



4435 Post Oak Tritt Rd, Marietta, GA 30062 | Phone: 770-642-5630

About >

Resources >

After School Program

Arrival/Dismissal Procedures

Cafeteria

Cafeteria - Classroom  
Celebrations Order Form

Communication & Social Media  
Accounts

Digital Textbooks

Kindergarten Information

Notes from Home

**Registration**

Schedules: 2022-2023

School Rules

Supply Lists: 2022 - 2023

Tritt Handbook

Virtual Tour

Community >

Curricular >

Extracurricular >

## Registration

SHARE [Facebook](#) [Twitter](#) [Print](#) [Email](#) [More](#)

*ALL KINDERGARTEN STUDENTS (2023 - 2024) MUST BE 5 BY SEPTEMBER 1, 2023 TO BE ELIGIBLE FOR ENROLLMENT. This is Georgia Law.*

### New to Cobb County School District or Returning to Cobb?

- If your student has never been enrolled in a Cobb County school, please visit the [CCSD enrollment portal](#) to fill out the registration form online before attending your enrollment appointment.
- Upload all required documents. Be sure to complete the "Submit Your Enrollment" process.

### Older Siblings in Cobb County School District?

- If you have older children, already enrolled in CCSD, please access [ParentVue](#) to complete the enrollment form online.
- Upload all required documents. Be sure to complete the "Submit Your Enrollment" process.

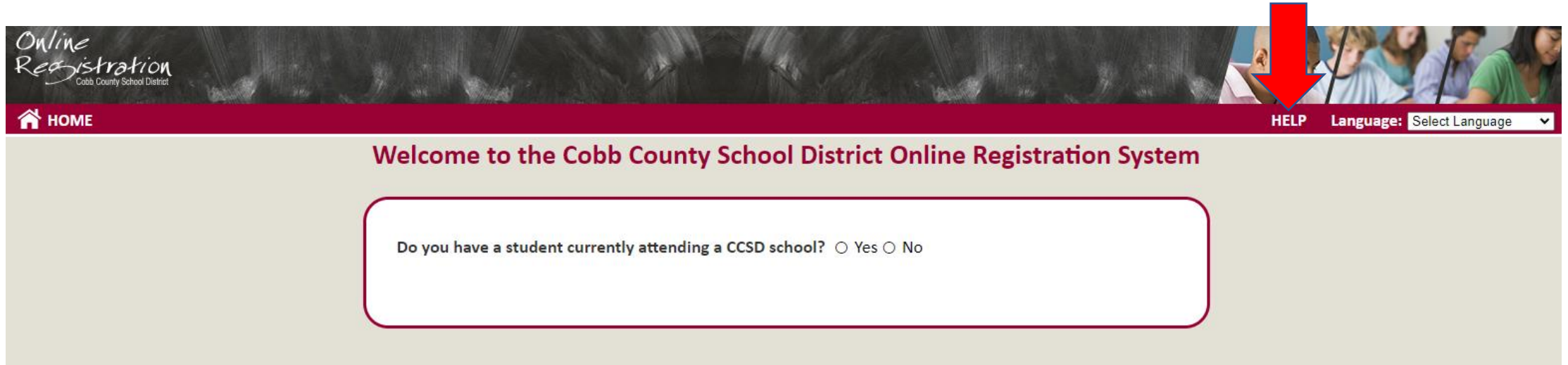
### Required Documentation

You will need to bring 5 required documents:

- Georgia Certificate of Immunization (Form 3321) ~or~ Immunization Waiver
- Georgia Certificate of Hearing, Vision, Dental, and Nutritional Screening (Form 3300)
- Proof of Birth Date (Birth Certificate, Passport, etc.)
- Two proofs of Residency
- 1) Home ownership title/ mortgage statement OR current Lease/Rental Agreement
- 2) Utility bill (water, power or gas)
- Social Security Number ~or~ Objection Waiver

For [DETAILED enrollment requirements](#) along with policies and regulations, please visit the [COBB COUNTY SCHOOL DISTRICT ENROLLMENT PAGE](#).

**THE COBB COUNTY ONLINE ENROLLMENT SCREEN WILL LOOK LIKE THIS.  
THERE IS A HELP SCREEN IF YOU NEED ASSISTANCE.**



Online Registration  
Cobb County School District

HOME HELP Language: Select Language

Welcome to the Cobb County School District Online Registration System

Do you have a student currently attending a CCSD school?  Yes  No

**HOW TO CHOOSE WHICH ENROLLMENT WORKS FOR YOUR FAMILY:**

\*New families with no students currently attending a Cobb County School- Choose NO and use ONLINE REGISTRATION LOGIN.

\*New students with a sibling who already attends a Cobb County School- Choose YES and use your PARENTVUE LOGIN.

\*Current Cobb Student transferring from one Cobb County School to Another Cobb County School- No need to fill out a new enrollment, just update your address in PARENTVUE and add your 2 new proofs of residency.

# HELPFUL TIPS

**\*\*THE USER NAME AND LOGIN YOU CREATE TO REGISTER YOUR STUDENT WILL ALSO BECOME YOUR PARENTVUE LOGIN- SAVE IT.\*\***

**ENROLLING ADULT DEFINITION:** The parent/guardian who (detailed definition on the CCSD website):

- 1) lives in the Tritt District- DWELLING ADDRESS
- 2) should be the first point of contact
- 3) will be the first to receive callouts and emails from the school or the county

The ENROLLING ADULT will automatically be marked with EDUCATIONAL RIGHTS, CONTACT ALLOWED and RELEASE TO rights.

**NOTE:** The ENROLLING ADULT will assign whatever rights they choose to each contact they enter on their student's enrollment. The enrolling adult may mark one, two or all rights as described below per contact.

**RELEASE TO –** This person has permission from the ENROLLING ADULT to pick up the student from during school hours 7:15 AM- 2:15 PM (ASP has a separate app)

**CONTACT ALLOWED–** This person has permission from the ENROLLING ADULT to be on campus for events such as lunch, classroom parties, field trips and general assemblies.

**EDUCATIONAL RIGHTS–** This person has been designated by the ENROLLING ADULT as someone school personnel may share educational records of the student with under FERPA.

**PARENTVUE DEFINITION:** This program gives the ENROLLING ADULT the ability to see the student's assigned student number, schedule, attendance, grades (for 4<sup>th</sup> and above), report cards, and more once the student starts their first day in a Cobb County School. The ENROLLING ADULT can also change/add/correct family information in real time.



**TRITTS**

**5 DOCUMENT  
TYPES  
NEEDED-  
UPLOAD TO  
COMPLETE  
YOUR  
REGISTRATION**



# 1. 2 PROOFS OF RESIDENCY

(only ONE from each section)

1) Current Home Ownership Title/Mortgage Statement/Property Tax bill -**OR**- current Lease/Rental Agreement. If you live in a shared residence, you can use the Statement of Legal Residency provided on the Online Enrollment. - It is important that we have one of the documents listed as we need to establish your residency in the Tritt Elementary and Cobb County School District.

2) Current Utility bill (water, power, or gas)

## 2. Social Security Card or Waiver

An official Social Security Card for the enrolling student

-or-

[Form JBC-4](#) (Statement of Objection to the Use of Social Security Number for Student Identification) can be found on the Cobb County website if you prefer not to use a social security card.

NOTE: A Social Security Number will eventually be required by the State for a student applying for the HOPE scholarship when your student enters high school.

# 3. Proof of Birthdate

The most common proof of birthdate are birth certificates and passports.

Acceptable documents are:

- Birth Certificate
- Passport
- Military ID
- Adoption Record
- A religious record authorized by a religious official
- An official school transcript
- Affidavit of age



# Medical or Religious Waiver

(if needed to replace Certificate of Immunization FORM 3231)

- Medical Waivers can be obtained from your physician and will need to be renewed every year. This is a 3231 marked exempt in the appropriate columns on the right and signed by a physician with attached documentation of a medical waiver.
- Religious Waivers can be found on the Cobb County Website- [Form JGC-4](#) (Waiver of Immunization Requirements Due to Conflict of Religious Beliefs) These forms do not need to be renewed.

# 5. FORM 3300 Certificate of Hearing, Vision, Dental, and Nutrition

**Georgia Department of Public Health**  
**Form 3300**  
**Certificate of Vision, Hearing, Dental, and Nutrition Screening**  
PLEASE SEE THE INSTRUCTIONS ON THE BACK OF THIS FORM  
FILE THIS FORM WITH THE SCHOOL WHEN YOUR CHILD IS FIRST ENROLLED IN A GEORGIA PUBLIC SCHOOL. SCREENER CONTACT INFORMATION IS REQUIRED.

**Parent/ Guardian Name:** first middle last  
**Parent/ Guardian Contact Information:** Daytime phone number: \_\_\_\_\_ Evening phone number: \_\_\_\_\_ Cell phone number: \_\_\_\_\_

**Child's Name:** first middle last  
**Date of Birth:** / / **Gender:**  Male  Female  
**Child's Home Address:** street city state zip code county

VISION	HEARING	DENTAL	NUTRITION
<input type="checkbox"/> Unable to screen (explain why below) <input type="checkbox"/> Uses corrective lenses <input type="checkbox"/> Worn for testing  <input type="checkbox"/> Passed (20/30 in each eye for age 6 and above, 20/40 in each eye for below age 6) <input type="checkbox"/> Needs further evaluation <input type="checkbox"/> Under professional care (explain below)	<input type="checkbox"/> Unable to screen (explain why below) <input type="checkbox"/> Uses hearing aid / assistive device  <input type="checkbox"/> Passed at 500, 1000, 2000, and 4000 Hz with audiometer at 20 or 25 dB <input type="checkbox"/> Needs further evaluation <input type="checkbox"/> Under professional care (explain below)	<input type="checkbox"/> Unable to screen (explain why below)  <input type="checkbox"/> Normal appearance <input type="checkbox"/> Needs further evaluation <input type="checkbox"/> Emergency problem observed <input type="checkbox"/> Under professional care (explain below)	<input type="checkbox"/> Unable to screen (explain why below) Height: _____ Weight: _____ BMI: _____ BMI%: _____ <input type="checkbox"/> 5' to 84th percentile - Appropriate for age <input type="checkbox"/> < 5' percentile - Needs further evaluation <input type="checkbox"/> ≥ 85' percentile - Needs further evaluation <input type="checkbox"/> Under professional care (explain below)
<b>Screening completed by:</b> <input type="checkbox"/> Physician <input type="checkbox"/> Local Health Department <input type="checkbox"/> Optometrist <input type="checkbox"/> "Prevent Blindness Georgia" employee <input type="checkbox"/> School Registered Nurse	<b>Screening completed by:</b> <input type="checkbox"/> Physician <input type="checkbox"/> Local Health Department <input type="checkbox"/> Audiologist <input type="checkbox"/> Speech-Language Pathologist <input type="checkbox"/> School Registered Nurse	<b>Screening completed by:</b> <input type="checkbox"/> Physician <input type="checkbox"/> Dentist <input type="checkbox"/> Local Health Department Registered Nurse <input type="checkbox"/> Registered Dental Hygienist <input type="checkbox"/> School Registered Nurse	<b>Screening completed by:</b> <input type="checkbox"/> Physician <input type="checkbox"/> Local Health Department <input type="checkbox"/> Registered Dietician <input type="checkbox"/> School Registered Nurse
<b>Screener's Signature</b> _____ <b>Date</b> _____ <i>I certify that this child has received the above screening.</i> <b>Contact Information:</b> _____	<b>Screener's Signature</b> _____ <b>Date</b> _____ <i>I certify that this child has received the above screening.</i> <b>Contact Information:</b> _____	<b>Screener's Signature</b> _____ <b>Date</b> _____ <i>I certify that this child has received the above screening.</i> <b>Contact Information:</b> _____	<b>Screener's Signature</b> _____ <b>Date</b> _____ <i>I certify that this child has received the above screening.</i> <b>Contact Information:</b> _____

**FOR SCHOOL SYSTEM ONLY** Follow up for further evaluation

	1 <sup>st</sup> attempt	2 <sup>nd</sup> attempt	Actions reported (if any)
Vision			
Hearing			

**Screeners' Comments:**



Each of the 4 boxes needs to be filled out, whether it's all on one form or on several forms combined. Some physicians will refer you to a dentist to have the dental portion filled out. We will take multiple forms if needed.

Each section of the form needs to be signed and dated by a physician's office within 12 months of the first day of school.

**REVIEW AND SUBMIT-** Please make sure you “Submit Application” upon completion. The system will ask you 2 times, and then you will receive a verification email. We no longer make registration appointments so no need to contact the office unless you have an issue.

Feel free to reach out to our Registrar at [Shell.Jones@cobbk12.org](mailto:Shell.Jones@cobbk12.org) if you have any questions.

