Cobb County School District



Student Portal Graduation Information Form Online Instructions

November 2022

Revision Chart

The following chart lists the revisions made to this document. Use this to describe the changes or additions made to the document each time it is re-published (draft or final). The description should summarize the changes as much as possible.

Date	Source	Description of Changes
11/02/2021	S. Wilcox	Initial Publication v1

GRADUATION INFORMATION FORM (Online Instructions for Students)

Access Student Portal via https://studentportal.cobbk12.org

COBB COUNTY	
Sign in	
Email, phone, or Skype	
Can't access your account?	
	Next

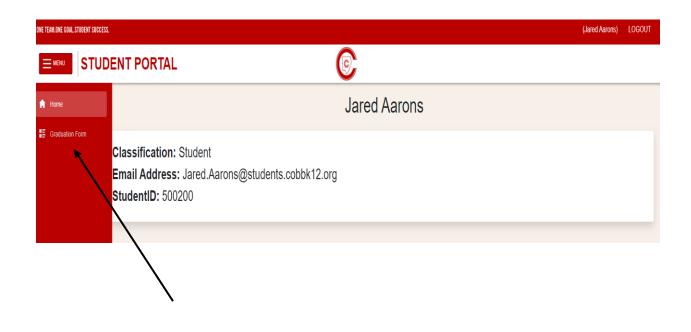
Students will sign in using their CCSD student email address.

COBB COUNTY	1			
Sign in				
Jared.Aarons@stud	ents.cobbk12.org			
Can't access your acco	ount?			
	Back	Next		

If you are in Office 365 you will be logged in to the Student Portal. If you are not logged in to Office 365, you will be asked to sign in with your username and password.

Sign in https://sts.co	bbbk12.org	
Username		
Password		
	Sign in	Cancel

Choose Graduation Form from the menu on the left.



Please read all directions before entering information on the Graduation Information Form. Complete all sections completely and accurately. Follow all instructions for each section.

NAME VERIFICATION

- Name
 - \circ $\;$ If the student name is correct as listed, do not make any changes.
 - If the student name as listed does not match the birth certificate, make changes in the appropriate field (first name, middle name, or last name) by deleting the incorrect name and typing in the correct name.
 - Add a suffix if a part of the legal name (Jr, II, III, IV, etc.) Do not use periods.
- Name Note
 - If the student name has any accents or special characters, please supply the information clearly in the text box. (accent over the e in Jared)
- Pronunciation
 - If the student name has unusual pronunciation, please explain clearly in the text box. (Aarons is pronounced Air Runs)

	4L		(C)		
		Graduation	Information	n Form	
		Nom	e Verification		
Please verify the complete and correct spelling of your FULL LEGAL NAME as it appears on your BIRTH CERTIFICATE. Make corrections, as necessary, below. There should be no initials, nicknames or abbreviations. If your name includes a special punctuation (such as an accent mark), please indicate that in the Name Note field. Please provide pronunciation information as necessary.					
	000 0000 0000 0000 00		d Paul Aarons		
	First Name	Middle Name	Last Name		
	Jared	Paul	Aarons	Suffix	
Name Note * Indicate accents or special chara	acters in student name				

DNE GOAL.STUDENT SUCCES J.					(Jared Aarons) LC
			©		
		Graduation	Information	n Form	
	unctuation (such as an ac	opears on your BIRTH CERTIF cent mark), please indicate the uppercase and lowercase as	at in the Name Note field. Ple	s necessary, below. There should be ase provide pronunciation informatic all lowercase or all uppercase lette	
	First Name	Middle Name	Last Name		
Name Note * Indicate accents or special characters in stud	Jared	Paul	Aarons	Suffix	
accent over the e in Jared					
Pronunciation					
Aarons is pronounced Air Runs					

Pronunciation Information

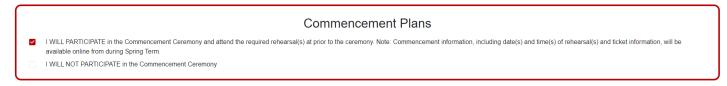
GRADUATION PLANS

• Indicate when you plan to graduate. You must choose either Fall Term or Spring Term.



COMMENCEMENT PLANS

• You must choose whether you plan to participate in commencement or not. Students who participate must wear proper attire. Information about commencement gowns will be communicated by the school. The default is set to **PARTICIPATE** until the form is completed and submitted.



CONTACT INFORMATION

- Enter the student cell phone number, if applicable.
- Enter the student email address, if applicable. DO NOT USE a CCSD (@cobbk12.org) email address.

	Contact Information			
	Student Cell Phone: Student Email: example@domain.com * Do not use CCSD email.			
SUBMIT				

Once you have completed all fields in the Graduation Information Form, please review for accuracy. When you are satisfied that you have completed the form accurately, **CLICK SUBMIT**.

Student Cell Phone:
SUBMIT

Once submitted, you will receive a message that the GRADUATION FORM SAVED SUCCESSFULLY.

Graduation Plans
I will complete all required course work and graduate at the end of:
🖂 Fall Term (December) 🔤 Spring Term (May)
I WILL PARTICIPATE in the Commencement Ceremony and attend the required rehearsal(s) at required rehearsal(s) at required rehearsal(s) at readuation Form Saved Successfully, available online from during Spring Term. I WILL NOT PARTICIPATE in the Commencement Ceremony
Contact Information
Student Cell Phone: (122455-7890 Student Email: sss@gmail.com * Do not use CCSD email.
SUBMT

Click OK.

Once submitted the Graduation Information Form may be viewed **<u>only</u>**.

Be sure to LOGOUT!		
ONE TEAM.ONE GOAL.STUDENT SUCCESS.		(Jared Aarons) LOGOUT
	C	
	Jared Aarons	
Classification: Student Email Address: Jared.Aarons@students.cobbk12.org StudentID: 500200		

If you have questions, please contact the graduation administrator or the Office of School Counseling at your high school.

