Sac History Day Registration Instructions - Students

- Teachers must FIRST register and add projects/students before you can register.
- The payment section is under development and will be active on January 27th.
- A parent/caregiver will need to complete parts of this registration.

Create your Account

- 1. Enter an email. School emails are often blocked use a home email.
- 2. Enter a password and confirm the password.
- 3. Go to the email we sent (check junk box)
 - 1. Click the "Verify Email" button.
 - 2. Then login you may need to refresh the login
- 4. Once logged in, choose "I am a Student".



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CALLFORNIA	The email looks like this and was sent from <u>nhdca@scoe.net</u>	
Welcome to the Registration Web Portal. Please enter the		
information below to create your account.		CALIFORNIA
Do not use your school email address		
Password *	Verify your email address.	Complete Your Web Registration
Must be at least 8 characters		Please select if you are a Teacher or a Student.
	Please verify your email by clicking the button below.	
Confirm Password *		
Already registered? Log in.	Verify Email	I am a Teacher
Sign Up	If you did not make this request, please disregard this email.	I am a Student
	Need additional assistance? Contact our support team nhdca@scoe.net	

Select Your School



Select School

The following will appear in order as you choose your responses: Please be patient, there might be a slight delay in loading lists

- 1. Grade Level
- 2. County
- 3. School District
- 4. School

If you do not find your school:

- Check to make sure grade level, county, district are correct.
- Check with your teacher to make sure they have completed their registration.
- Your school will not show up until your teacher has registered.

Grade Level *	
Grade 7	•
County *	
Sacramento	-
District *	
San Juan Unified	-
School *	
Arcade Middle	
Cancel	Submit

Associate with a project

Find your name and click on the "This is me" button to be added to the project. If there is a long list, you can use the "Filter by" to filter on project title or name.

XT STEP:			sac-r	hd.sco	be.net	says		
1. Find your name in the list below 2. Click the 'This is me' button next to	o your	name	Confin Americ	m Jennif can Inter	er Adam: nment ar	s as the memb d Redress Eff	per of this project: Japa forts	inese
cade Middle								
cramento County							Cancel	Ж
-ilter by:								
Search								
Full Name	ţţ	Project Title	Registered?	Payment ↓↑	Paid? ↓↑	Actions		
<u>This is me</u> → Muscat, Brian		The Sierra Club Environmental Movement	No	School	[need]			
<u>This is me</u> →McAdams, Susan		Save Mono Lake Campain	No	School	[need]			
<u>This is me</u> → Belecky, Mike		Save Mono Lake Campain	No	School	[need]			
<u>This is me</u> \rightarrow Strickland, Jason		Save Mono Lake Campain	No	School	[need]			
This is me - Adams, Jennifer		Japanese American Internment and Redress Efforts	No	School	[need]			
This is me → George, Amy		Japanese American Internment and Redress Efforts	No	School	[need]			
		6 1000140						

Create your profile account

- 1. Select the "User" menu on the left and then "Profile"
- 2. Create your profile "Account"



Complete your profile Account:

- Verify your name is spelled correctly.
- · Add a nickname to display on your name badge (optional)
- Enter phonetic pronunciation.
- NOTE: Your email is entered automatically. If you change your email address it will also change it for when you log in.

Student Name Instructions: • Your name will print on your NAME BADGE as: Jen Adams • Your name will print on your CERTIFICATE as: Jennifer Ad	ams
First Name *	Last Name *
Jennifer	Adams
Use Nickname	Nickname (Name Badge Alternate) *
Yes	Jen
○ No	If you would like a different name on your name badge, enter it here. For example -
Do you want a different first name on your name badge? For example - Ally instead of Alexandra, Matt instead of Matthew.	Ally instead of Alexandra, Matt instead of Matthew.
Phonetic Pronunciation of your Full Name	Email Address (also used for log in) 🛛 *
	jadams@gmail.com
Ex: Raul Gonzalez: rah-OOL gon-SAH-les or Ngoc Nguyen: nank nuhWEN or sounds like 'Knock' 'WIN'	Use a personal email account. Please make sure the email address can not be blocked by your school district.
	Save

Complete your registration

- 1. Select the "User" menu on the left and then "Registration"
- 2. Complete the registration sections.

MENU					
🛧 Home					
🖽 User					
2 Profile		School	Project	Profile	Registration
Registration Project	Student Da	ashboard			
〔→ Logout	Jennifer Adam	IS			
	NEXT STEP: Pleas	se complete your	Registration by:		
	1. Select 'User' 2. Then select 'I	under the menu o Registration'	on the left		
	NHD Sacramento				
	Welcome to the S	acramento Histo	ry Day Competition.		
	Competition Date	: Saturday, Marc	h 15th		
	Location: Sacrame	ento State Univer	sity Union		
	Special Awards				
	If you would like t	o register for a s	pecial awards use this	link:	

Complete Personal Information:

- Pronouns are optional.
- Not all contests provide a t-shirt.
- Cell phone is optional. Parents will also have a space to provide a cell phone in a later step.

NOTE: you can save progress and return later to complete additional steps.

Pronouns to use on your name badge	T-Shirt Size *
she/her/hers	- Medium
	Sizes are adult unless specified as youth
Grade Level *	How many Years of Experience with History Day? *
Grade 7	✓ 2 Years
Street Address *	City *
111 Main Street	Sacramento
State *	Zip Code *
CA	95866
Cell Phone	
(916) 222-3333	

Complete the Statement of Agreement/ Originality

• Please be sure to read the agreement. It is a good idea to have a parent read it as well.

Statement of Agreement / Originality
Please note that you must choose "Yes" for the following authorization in order to complete the online registration and to compete at the NHD Sacramento Contest. If you have further questions, please contact the contest coordinator. IT IS RECOMMENDED THAT YOUR PARENT / CAREGIVER ALSO READ THIS STATEMENT.
 I affirm that the entry submitted for competition was researched and developed during this school year. I have read the National History Day rules and policies governing student behavior and will conform to these rules. (The rules can be found achitos://www.hufu.co.rules) I will make sure that my project's WORD COUNT is within the allowed number of student composed words for my project category. I understand that violation of these rules may result in my project not advancing to the next round of competition, and / or the disqualification of my entry. I understand that selecting "Yes" below and submitting my registration shall have the same force of law as my original signature and that I am not obligated in any way to make such agreement, except as prerequisite to my participation in this program.
I have read the above statement and agree; I will follow the rules of this contest. I acknowledge that the work I am submitting is my own and it may be subject to plagiarism or academic integrity review as determined by the contest coordinator: *
Back Save Progress to Return Later Continue

Complete Parent/Caregiver Information

You must have one parent/ caregiver listed. A second one is optional.

We will send information emails to one or both caregivers listed on a student record.

You must have a chaperone in attendance at the contest. (only for in-person contests)

Devent / Caraciver One	
Parent / Caregiver One	
First Name *	Last Name *
Betsy	Adams
Email Address *	Cell Phone *
badams@gmail.com	(999) 666-2222
Did Betsy Adams participate in NHD as a student? *	
○ Yes	
● No	
Parent / Caregiver Two (optional)	
First Name	Last Name
John	Smith
Email Address	Cell Phone
email@example.com	(###) ###-####
Who will be in attendance at the contest to serve as my ch *	aperone?
Parent / Caregiver One listed above	
O My History Day Teacher	
Othor	

Complete Medical/Emergency Information

Provide insurance and doctor's information. If no medical concerns or medications please put n/a.

If your child needs an accommodation for their interview (sign language, wheel chair, etc.) please email us so we can make arrangements.

М	IST BE FILLED OUT BY A PARENT / CAREGIVER	
Insurance Provider Company *	Insurance Policy Number *	
Blue Shield	10002455	
Doctor's Name *	Doctor's Phone	
Dr. Smith In the field below, indicate all medical concer etc.) * N/A	(916) 333-5555 as and restrictions (e.g. diabetes, allergies to medications and/or foods, heart pr	roblems, asthm
Dr. Smith In the field below, indicate all medical concer etc.) * N/A Taking Medications - Please list any medicati	(916) 333-5555 as and restrictions (e.g. diabetes, allergies to medications and/or foods, heart pr	roblems, asthm
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Complete Authorizations & Releases

Be sure to click "submit".

Authorization & Releases for Jennifer Adams

MUST BE FILLED OUT BY A PARENT / CAREGIVER

Medical Consent

I, the undersigned, hereby give consent to have the above signed treated by a physician or surgeon in case of sudden illness or injury while participating in NHD Sacramento Contest and activities; including, authorization and consent for any x-ray examination, medical anesthetic, or surgical diagnosis rendered under the general or special supervision of any member of the medical/vental staff and emergency room staff licensed under the provisions of the Medical Practice Act or Dental Practice Act and on the staff of any acute general hospital holding a current license to oper-set a hospital from the State of California Department of Public Health. It's understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and permis-sion to render care which the aforementioned physical in the exercise of his/her best judgment may deme and/sable. It's understood that the undersigned cannot be reached. This authorization is given pursuant to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached. This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of the State of California. The signing of this relazes only gives the organiz-ers of this program and agents thereof, the right to consent for treatment of minors. It does not release signee of liability from medical cost arising from said treatment. The releasees do not assume liability of said cost and are not liable for any complications arising from said treatment. It is understood that the releasees of not assume liability of said cost and are not liable for any physician is listed, every effort will be made to contact such physician. However, the location of the event or the nature of the liness or injury may require the use of emergenormed.

I hereby agree to the terms outlined above and give medical consent for my child to participate in the NHD Sacramento Contest:

Yes

Permission

I hereby request participation in the 2025 NHD Sacramento Contest. My parent or guardian, whose signature is shown below, and I hereby agree to follow the rules of competition and accept the interpretations and decisions made by the competition manager. The competition will be run in compliance with local and state health and safety requirements. Additionally, we understand and agree to the following specific provisions:

1. VOLUNTARY RELEASE: Assumption of Risk and Indemnity Agreement: In consideration of the acceptance of my child's participation in the NHD Sacramento County Office of Education, their representatives, officers, successors, and assignees, directors, staff, workers, participating volunteers, and all other hosts therein collectively referred to as "releasees") from all claims and liability arising out of strict liability or ordinary negligence or hold harmless and cover release for all claim judgment(s) or expense) that may incur arising out of my child's participation in this event contain a certain risks of injuries, that the event will be indoors and outdoors, and that there is inherent risk in doing so which I voluntarily assume, because I choose to do so. I further know that there participants may pose a risk as there may be physical activities. I voluntarily elect to accept all risks connected with participants.

2. INFORMATION RELEASE: By completing and signing this request (below). I (student and parent/guardian) hereby give permission and indicate consent to the release of educational information about or relative to participation in the NHD Sacramento Contest. Such information about or relative to participation in the NHD Sacramento Contest. Such information about or relative to participation in the NHD Sacramento Contest. Such information about or relative to participation in the NHD Sacramento Contest. Such information about or relative to participation in the NHD Sacramento Contest. Such information about or relative to participation in the NHD Sacramento Contest. Such information about or relative to participation in the NHD Sacramento Contest. Such information and so solial media platforms including but not limited to Instagram, Facebook, Linkedin, X, Blue Sky, Threads, and TirKok. I further grant permission to be shown on videconference (eg. Zoom, Team), closed circuit V systems, shared with other classes and schools, shared at community and professional meetings, aired by cable stations, entered into educational or nuedia contests, posted on websites and used for the purposes of study, comparison, and furtherance of knowledge in the fields of education or human behavior. The releasees shall have the right to reproduce, use, display, and disseminate in such manner as they see fit, without obligation of any kind to any person, the contest results and materials I produce for this contest. L understand and agree that all media will become the exclusive property of the releasees and there will be no compensation or remuneration.

3. Prohibition of Audience/Participant Reproduction of Virtual Event. I agree that my child and I will adhere to virtual privacy policies and California privacy statutes by refraining from capturing images (through screenshot or other means), recording and/or rebroadcasting any part of the virtual event without authorization. Any recording or capturing of images will result in disqualification.

4. Code of Conduct. I will comply with the following requirements. I agree that if I violate any of these I may be disqualified and asked to leave:

I will conduct myself in compliance with my school site codes of conduct.

- I will accept the decision of the judges and competition coordinators as final. I will respect the judges' decisions and discuss any
 concerns with the event coordinator in a respectful manner.
- I will respect all judges, staff, teachers, students and parents and conduct myself in a manner that is courteous to everyone.
- I will model good sportsmanship at all times.

I have read and agree to the contents of this document. By clicking yes below, I hereby

Give permission and consent to the voluntary release and information release (Items 1-4) described above.

I understand that my child must **comply with the safety measures** to participate in the competition Agree to follow all of the **rules of the competition and code of conduct**.

I also understand that by signing this document, I am assuming all risks associated with my child's participation in the event

I hereby give permission and agree to everything above:

🖌 Yes

First Name of Signee *	Last Name of Signee *	
Betsy	Adams	
Relationship to Signee *		
Mother		
Back		Submit

Payment

We are working on the payment section and hope to have it active on January 27th. Once active we will send an email so you can complete the payment section.

Once available:

If your school is paying for you then your Payment check box will turn green.

If student is paying, you can use our secure JotForm payment link to process your payment.

Edit Project Details & Upload Projects

Select the Project Details button on the left side of your dash board.



Project Details page allows you to:

- Change your title This is how it will print on forms and your certificate. Check spelling and capital letters.
- Request an interview time frame.
- Submit: Websites, Documentaries & Podcasts

Due February 27th

- Submit a project link for these 3 categories
- Upload written materials by this date. One PDF with:
 - Title Page
 - Process Paper
 - Bibliography

See rules for more information about written materials: <u>https://www.nhdca.org/contest-rules/</u>

Both Teachers and Students have access to the Project Details page and are allowed to make changes, add project links & upload written materials.

Be sure to click "**Submit**" so your changes are saved.

Project Details

This page shows your project information. You may do the following:

- Title Changes: Closes February, 12th.
- After this date, you can still change the title of your project that you bring to competition, but printed items (judge score sheets, event program, etc.) will not reflect the change.
- Submit Project Link: (Optional) Closed April, 22nd.
- Interview Time Requests: Request an early or late interview time within the Interview window Closed January, 1st.
- Written Materials Upload: Upload your Written Materials PDF Closed January, 1st.
- Historical Paper Upload Upload your Historical Paper PDF Due February, 12th.

Project Last Updated: 1/18/2025 9:55:05 AM

County: Alameda
School: Foothill High
Division: Senior
Category: Historical Paper
Students Listed on Project: Tim Smith

Project Instructions:

Please check spelling & capitalization.

Project Title *

sapanese interniner

Cancel

Upload Instructions:

Upload Written Materials or Historical Paper

Drag your PDF into the box or use the 'browse files' link to add a PDF.

Drop files here or browse files