

King Kekaulike High School Edline Activation Code Request Form

PLEASE PRINT CLEARLY:

Parent:

Date:

Last Name:

First Name:

Address:

City

Zip:

Phone Contact #:

E-mail Address:

Student Last Name:

Grade:

Student First Name:

☐

I don't remember my Edline account information.

☐

I would also like my child's activation code.

☐

My problem is: _____

Signature

Date

For Office use:

Registrar:

Date:

Action:

Verified initials:

Date completed:

Notes: