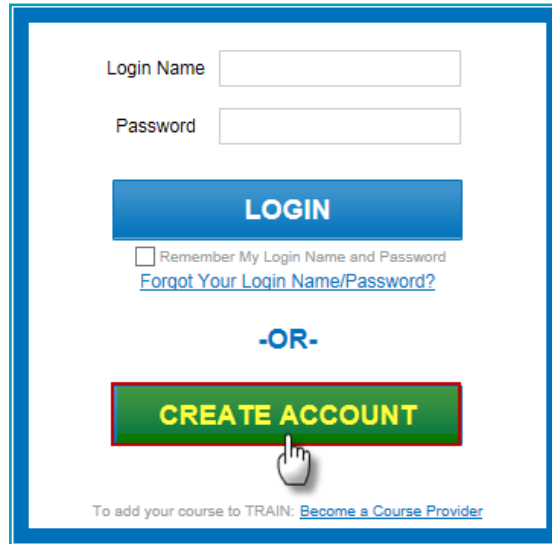


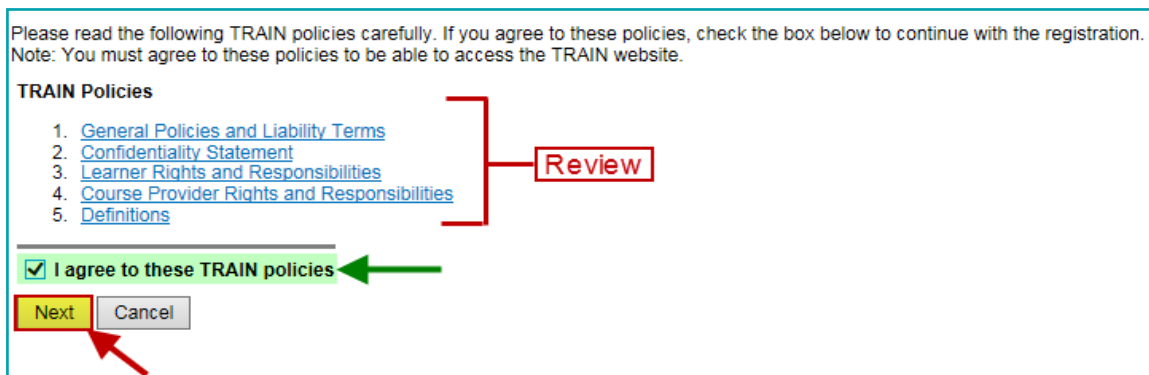
**Step 1:** Go to the [TRAIN Florida log in page](https://fl.train.org) – <https://fl.train.org>

We recommend adding this page to your Favorites list, so you can navigate back to it easily in the future.


Click on the **Create Account** button.



**Step 2:** The next page is a list of **TRAIN policies**. Please review this list. You must agree to continue. Click to check the box next to **I Agree to these TRAIN Policies** – Click the **Next** button



**Step 3:** The next page is your **account information entry** page.

All information **required** by the TRAIN system will be marked by a **red asterisk**  the system will not let you continue if you leave one of the required fields blank.

Please fill in all text fields using **Spell Case** (Example: John Smith / Jones Avenue) and use full words whenever possible – Do not use abbreviations or acronyms.

We recommend leaving the “**I would like to receive emails from TRAIN**” box checked. The system will use it to send confirmations and information regarding your courses and account.





### NOTE:

The Florida Department of Health and Florida's Public Health System Partners use TRAIN Florida data to help assess and improve the quality of our trainings, and to determine which new courses to design in TRAIN Florida. We respectfully request that all new TRAIN Florida learners complete all non-optional fields located on the account, professional roles and work settings information forms. Your information **is not** shared with any outside entity. This information is kept secure, for use only by the vendor for reporting and system improvement purposes.

- Please do not enter your **personal** information
- Enter your business, organization, school, or university into the Organization and Department name fields
- If you are not affiliated with business, organization, school, or university, please enter **Florida – General** in the Organization name field.
- Enter your business, organization, school, or university address; phone number, city and zip code

Please fill in all text fields using **Spell Case** (Example: John Smith / Jones Avenue) and use full words whenever possible – Do not use abbreviations or acronyms.

| Required Fields   | Optional Fields     |
|---|---------------------|
| Login Name *  | Middle Name         |
| Password *  | Telephone (evening) |
| Confirm Password *  | Daytime Extension   |
| First Name *  | Pager               |
| Last Name *   | Fax                 |
| Position Title *  | Mobile              |
| Telephone (daytime) *   | Bureau/ Section     |
| <small>Example: (777)777-7777</small>   | Address 2           |
| Email *   |                     |
| Confirm Email *   |                     |
| Organization name *   |                     |
| Department / Division *   |                     |
| Address 1 *   |                     |
| Country *   |                     |
| State / Territory *   |                     |
| City / Township / Town *  |                     |
| Zip code / Postal code *  |                     |
| County *  |                     |
| Please choose your secret question and provide a ONE WORD answer.                               |                     |
| Question *  |                     |
| Answer *  |                     |
| <input checked="" type="checkbox"/> I would like to receive emails from TRAIN                   |                     |
| <input type="checkbox"/> I would like to receive notifications about the site updates by email. |                     |

**Next**

When you have finished entering your account information – Click the **Next** button.





### Step 4: The next page is the **Group Selection** page.

Everyone with an account in TRAIN Florida must be assigned to at least one group. System resources including training courses, announcements, discussion boards, etc. can be tailored for specific group visibility and access. Your group choice opens your access to these resources.

**Note:** All state-wide Florida Department of Health and Florida's Public Health System Partners relevant public health training courses [are available](#) to all TRAIN Florida learners.

You may choose to group your account in more than one category, however to simplify your account creation we highly recommend you **choose a single group to start**.

Note: If you are **not** a Florida Department of Health employee, please do not select the Florida Department of Health or Florida Department of Health Non-FTE group. [Please select the Florida – General group](#).

After your account is created, you may add more groups. Here is a link to a help document to guide you in adding a group – [How Do I Assign/Update My TRAIN Florida Groups?](#)

**Group Selection:** As a member of TRAIN, you have the opportunity to participate on one or more of the TRAIN portals listed below. TRAIN portals are connected and will not require you to have a separate accounts or logins. Remember that you will only need one TRAIN account for any portals you select.  
To participate on one or more portals, follow the instructions below.

1. Choose the "Select Groups" button next to the desired portal, "State Portal", "MRC Portal" (Medical Reserve Corps), "CDC Portal" (Centers for Disease Control and Prevention), "HRSA Portal" or "VHA Portal".
2. Select your groups within each portal.

The portals and groups you select will determine what TRAIN content (including courses) you can access.

Select the state or territory in which you work, study, or reside - or select "International".

|              |               |                    |
|--------------|---------------|--------------------|
| State Portal | Select Groups | No Groups Selected |
|--------------|---------------|--------------------|

If you are a member of the Medical Reserve Corps, then you should select MRC Portal in addition to your state.

|            |               |                    |
|------------|---------------|--------------------|
| MRC Portal | Select Groups | No Groups Selected |
|------------|---------------|--------------------|

To access additional CDC TRAIN (Centers for Disease Control and Prevention) content, and to participate in CDC-hosted communities of practice, you should also add the CDC Portal.

|            |               |                    |
|------------|---------------|--------------------|
| CDC Portal | Select Groups | No Groups Selected |
|------------|---------------|--------------------|

To access additional Health Resources and Services Administration (HRSA) content, and to participate in HRSA practice and content groups, you should add to the HRSA Portal. HRSA grantees are especially encouraged to select HRSA groups.

|             |               |                    |
|-------------|---------------|--------------------|
| HRSA Portal | Select Groups | No Groups Selected |
|-------------|---------------|--------------------|

To access additional Veterans Health Administration, Employee Education System content, you should add the VHA Portal.

|            |               |                    |
|------------|---------------|--------------------|
| VHA Portal | Select Groups | No Groups Selected |
|------------|---------------|--------------------|

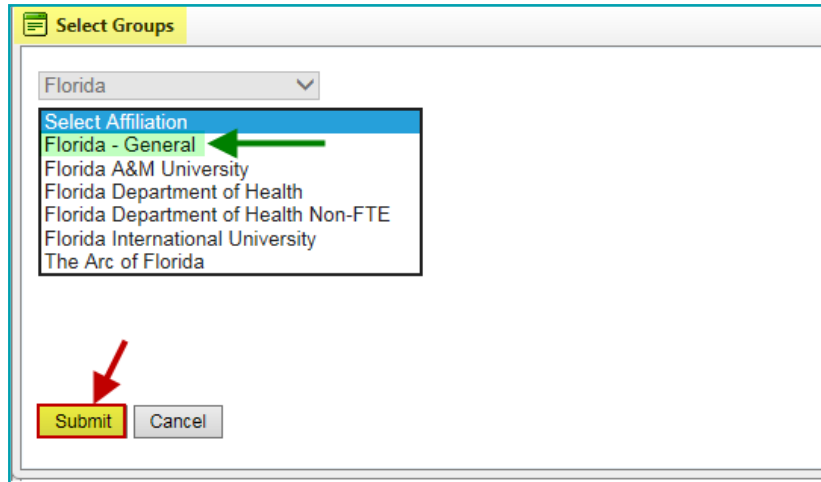
Note: You must select at least one portal.

Back Next



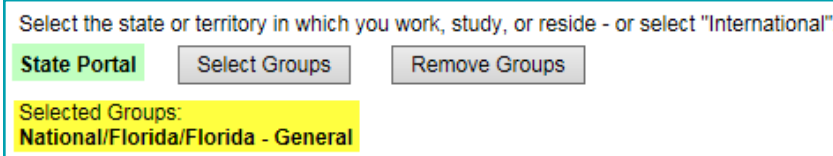
Locate the **State Portal** section – Click the **Select Groups** button.

- A.** The **Select Groups** window will open over the Group Selection page.  
The state will be set to Florida in the first field, populated from your account information.  
Use the **Select Affiliation** drop down menu – **Click on Florida – General**.



Click the **Submit** button. The Select Groups window will close.

- B.** The **Group Selection** page will now show your group assignment Florida - General under the State Portal – Selected Groups.



Click the **Next** button.



**Step 5:** The next page is the **Professional Roles** page.

Review the list and choose the role(s) closest to your primary job classification or current role.  
Use the drop down menus to choose a sub-category role where appropriate.  
If you choose Other, be sure to specify using the appropriate field.  
**You must choose at least one role**, but you may choose up to three (3).



Please take a minute to review all roles before making your selection.

Please select up to three (3) **Professional Roles** that best match your profession, and select Specialization where available. If the "Other" option is selected, please enter specialization.

| Professional Role   | Value  |
|---|--------|
| <input type="checkbox"/> Allied Health Professional                     | Select |
| <input type="checkbox"/> Administrator / Director / Manager             |        |
| <input checked="" type="checkbox"/> Administrative Support Staff        |        |
| <input type="checkbox"/> Animal Control Specialist / Veterinarian       |        |
| <input type="checkbox"/> Biostatistician                                |        |
| <input type="checkbox"/> Childcare Provider                             |        |
| <input type="checkbox"/> Communicable Disease / Infection Control Staff |        |
| <input type="checkbox"/> Computer / Information Systems Specialist      |        |
| <input type="checkbox"/> Dental Professional                            | Select |
| <input type="checkbox"/> Emergency Responder                            | Select |
| <input type="checkbox"/> Policy / Planner                               |        |
| <input checked="" type="checkbox"/> Program Specialist                  |        |
| <input type="checkbox"/> Public Health Official                         |        |
| <input type="checkbox"/> Public Relations / Media Specialist            |        |
| <input type="checkbox"/> Researcher / Analyst                           |        |
| <input type="checkbox"/> Student  |        |
| <input type="checkbox"/> Teacher / Faculty                              |        |
| <input type="checkbox"/> Volunteer                                      |        |
| <input type="checkbox"/> Other (specify) _____                          |        |

Back Next

**Step 6:** The next page is the **Work Settings** page.

Review the list and choose the role(s) closest to where you are currently employed. Use the drop down menus to choose a sub-category setting where appropriate. If you choose Other, be sure to specify using the appropriate field.  
**You must choose at least one setting**, but you may choose up to three (3).

Please select up to three (3) **Work Settings** that best fit your work environment. Choose Subcategories where applicable.

| Work Settings  | Value    |
|--|----------|
| <input type="checkbox"/> Academic / Educational Institution          | Select   |
| <input type="checkbox"/> Official Public Health Agencies             | Select   |
| <input type="checkbox"/> Military                                    |          |
| <input type="checkbox"/> Other Government Agencies (except Military) |          |
| <input checked="" type="checkbox"/> Healthcare Services              | Hospital |
| <input type="checkbox"/> Indian Health Service                       |          |
| <input type="checkbox"/> Tribal Health Sites                         |          |
| <input type="checkbox"/> Non-Profit Organization (except Healthcare) |          |
| <input type="checkbox"/> Private Industry (except Healthcare)        |          |
| <input type="checkbox"/> Other (specify) _____                       |          |

Back Next

**Check the box** next to your chosen work setting(s) – Click the **Next** button.



**Step 7:** The next page is the **Demographic Information** page.

Entry of this information is optional.

You may choose to enter as much or as little information as you choose.

**NOTE:** This information is kept secure, for use only by the vendor for reporting and system improvement purposes.

| Please select appropriate demographic information (optional). |   |
|---|---|
| Demographic Information                                       | Value                                     |
| Education level (highest attained)                            | Select <input type="text"/>               |
| Sex   | Select <input type="text"/>               |
| Ethnicity   | Select <input type="text"/>               |
| Race  | Select <input type="text"/>               |
| Birth Date  | <input type="text"/> (Format: MM/DD/YYYY) |
| Primary Language  | Select <input type="text"/>               |
| Secondary Language  | Select <input type="text"/>               |

Back Next

**When you are finished** – Click the **Next** button.

**Step 8:** The next page asks if you hold a **professional license number**.

**If you do not hold a license** – Click the button next to **No** ☒ No and click the **Next** button.

Do you hold a Professional License Number? \*

☒ Yes

☐ No

Back Next

**If you would like to add licensing information** – click the button next to **Yes**.

**NOTE:** If you are a licensed professional, entry of this information ensures CE credit courses taken in TRAIN Florida, will be reflected properly on your TRAIN Transcript. You may enter multiple license numbers if needed.

The screen will refresh and open the **License Type** fields.

License Type 1: \* Nursing  LPN (Licensed Practical Nurse)

License Number 1: \* 444LPNTestLicenseNumber

License Type 2: --- None ---  --- Select ---

License Number 2:

Back Next

Use the drop down menu in the **License Type 1** field to choose your license type.

Choose the proper title in the **Select** field if appropriate.

Next enter your license number into the **License Number 1** field.

Repeat in the Type 2 fields if you have another.

**When you are finished** – Click the **Next** button.







## Creating a TRAIN Florida Account

It's a New Day in Public Health

**Step 9:** If you have chosen more than one Professional Role or Work Setting the **User Attribute Primary Selection** screen will open. \*\*  
Choose a primary attribute in the drop down menu.

**User Attribute Primary Selection**

You have selected more than one professional role and/or work setting as listed below. Please choose which of these selections represents your professional role and/or work setting

| Category name     | Primary Attribute  |
|-------------------|--|
| Professional Role | --Select--<br>Administrative Support Staff<br>Program Specialist |

**Continue**

\*\* You will not see this screen if you have chosen one Professional Role, and one Work Setting.

Click the **Continue** button.

Hello, **Jane**

Your **NEW ACCOUNT** has been created.  
Click on **Continue** button to register for your course.

To receive emails from **TRAIN**, you must confirm your email account. An email has been sent to you from the **TRAIN** system. Please open this email and click or copy and paste the link in that message.

**Continue**

**You have successfully created an account in TRAIN Florida!**

After you click the **Continue** button, you will be taken to your **TRAIN Florida learner home page**. From this page you have access to all of the resources and features **TRAIN Florida** has to offer.

Florida TRAIN

Welcome Jane! | My Account | Logoff

**TRAIN**Florida

Florida Department of Health's  
Official Learning Management System

Thursday, February 19, 2015

Home Competency Assessment Resources Discussions Help

Search by Keyword or Course ID **Advanced Search**

**Announcements**

Upcoming Events for the next 2 months

**Upcoming Events** Click to Expand

The TRAIN Florida FY14-15 Semi-Annual Report is Now Available

The TRAIN Florida FY 14-15 Semi-Annual Report has been added to the [TRAIN Florida Resources](#) feature.

We encourage all learners to review this report.

It highlights training data collected from the TRAIN Florida portal and shows an over 90% compliance rate of DOH employees enrolled in the DOH Mandatory Refresher Trainings. It also shows the continual growth of TRAIN Florida as a central location for Public Health trainings not only for the state, but the nation.

With input from you, our TRAIN Florida learners, the Department is able to provide quality trainings to our employees and Public Health Partners around the state of Florida.

Thank you for your help in supporting the Department's goal in becoming a Learning Organization.

The TRAIN Florida Team

**Video Update Simplifies TRAIN Florida Learner Orientation**

The TRAIN Florida Learner Orientation has been updated!

**Jane's Dashboard**

- My Action Items Click to Expand
- My Learning
- My Certificates
- My Training Plans
- My Surveys
- My Links

**EMS4Stroke LMS Available for TRAIN Florida Learners!**

The [EMS4Stroke](#) web page is a **FREE** stroke educational program that offers tools and resources for Emergency Medical Services (EMS) personnel and trainers. The site provides a one-stop-shop for [Stroke Awareness for Healthcare Professionals](#).

The [EMS4Stroke](#) Learning Management System (LMS). Please review the [How to Manage EMS4Stroke Courses in TRAIN Florida](#), for help on how to access the EMS LMS, create an account and locate courses.

**Manage TRAIN Florida: Knowledge, Resources, and Tutorials**

[TRAIN Florida Learner Orientation and Guide](#)

[TRAIN Florida Knowledge Center](#)  
[TRAIN Florida Learners Knowledge Center](#)  
[TRAIN Florida Administrator Knowledge Center](#)  
[TRAIN Florida Course Provider Knowledge Center](#)

[Free Continuing Education Courses in TRAIN Florida](#)  
[Free Continuing Education Courses Not Listed in TRAIN Florida](#)



Creating a TRAIN Florida Account





## Creating a TRAIN Florida Account

It's a New Day in Public Health

We recommend viewing the [TRAIN Florida Learner Orientation video](#).

Though parts of this presentation will not specifically apply to you as a Florida - General User, it will provide guidance on the basic functions and features of the TRAIN Florida system, as well as the tools designed by the TRAIN Florida Support Team to help you use this system.

The [TRAIN Florida Learner Knowledge Center](#) web pages are a valuable resource for help with TRAIN Florida. If you have any questions you cannot answer using this resource, please contact the TRAIN Florida Support Team at [DOHLMSSupport@flhealth.gov](mailto:DOHLMSSupport@flhealth.gov).

