

Managing your account in MI-TRAIN 3.0

1. Go to <http://www.train.org/mi-train> and login.
2. To access your profile click your name in the upper right-hand corner of the page. Then select "Your Profile".


Classic TRAIN Kerry

MI - TRAIN **MDHHS** Michigan Department of Health & Human Services

HOME COURSE CATALOG YOUR LEARNING CALENDAR ADMIN HELP

What do you think of the new site? Your opinion is important to us!

Announcements

 [Welcome to MI-TRAIN 3.0](#)
Kerry Chamberlain
Dec 7, 2017

On December 13, 2017 MI-TRAIN was upgraded to the new TRAIN 3.0 platform. This is a major change to the look and feel of MI-TRAIN. Here are some of the changes:

- Announcements are moved to the top of the page.
- The look and feel is updated to a new, cleaner style.
- Recent courses and training status is listed in bold graphics on the user home page.
- The new calendar is searchable.


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MI - TRAIN **MDHHS** Michigan Department of Health

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3. Manage groups will appear first. This is where you can edit your groups. Click the pencil to edit your groups. Click the Join Another Group or Join Group (if you are not part of any groups yet) button to add groups. Groups give you access to different types of courses.

Close

Save

Your Profile

Your profile contains all your system settings and attributes. Please note that some fields are required, until you complete all required settings some site functionality may be limited. For your convenience each section in the profile will indicate if it is incomplete.

Manage Groups

- Account
- Contact
- Address
- Organization
- Professional Role
- Work Settings
- Demographic Information
- Michigan Volunteer Registry
- FEMA Student ID Number
- Professional License

Manage Groups

National/Affiliate Administrator

- National/Michigan
 - Local & Regional Organizations & Agencies
 - Local & Regional Organizations & Agencies/Region 5
 - State/Government Agencies/Michigan Department of Community Health
 - State/Government Agencies/Michigan Department of Community Health/Community Health Coordination Center
 - State/Government Agencies/Michigan Department of Community Health/Office of Public Health Preparedness
- National/Michigan

[Join Another Group](#)

Edit groups

Add groups

4. Click Account on the left to access your e-mail address, name, password reset and your preference to receive e-mails from MI-TRAIN.
 - a. NOTE: If you leave the box to receive e-mails from TRAIN unchecked, you will not receive any e-mails including registrations confirmations from the system. The best option is to opt-in.

Close

Save

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Manage Groups	Account (Fields marked below are required)
Account	Email <input type="text"/>
Contact	<input type="checkbox"/> I would like to receive emails from TRAIN. <input type="checkbox"/> I would like to receive annual notifications to keep my account up to date.
Address	
Organization	
Professional Role	
Work Settings	Last Name <input type="text"/>
Demographic Information	<input type="text"/>
Michigan Volunteer Registry	Middle Name <input type="text"/>
FEMA Student ID Number	<input type="text"/>
Professional License	Last Name <input type="text"/>
	Login Name <input type="text"/>
	<input type="button" value="Reset Password"/>

Click to receive e-mails from the system.

Reset your password here.

5. Click Contact on the left to access your listed phone numbers. Click "Add Another Phone Number" to add multiple phone numbers.

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Contact (Fields marked below are required)

Phone Numbers

✎	Work	[Redacted]	✖
✎	Home	[Redacted]	✖
✎	Mobile	[Redacted]	✖

↑

Edit a phone number

↑

Delete a phone number

6. Click Address on the left to add or edit your address.

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Address (Fields marked below are required)

<p>Country</p> <div style="border: 1px solid #ccc; padding: 2px;">United States ▾</div> <p>State / Territory</p> <div style="border: 1px solid #ccc; padding: 2px;">Michigan ▾</div> <p>City</p> <div style="border: 1px solid #ccc; padding: 2px;">[Redacted]</div> <p>Zip / Postal Code</p> <div style="border: 1px solid #ccc; padding: 2px;">[Redacted]</div>	<p>Street Address</p> <div style="border: 1px solid #ccc; padding: 2px;">[Redacted]</div> <p>Street Address Cont.</p> <div style="border: 1px solid #ccc; padding: 2px; height: 20px;"></div> <p>Time Zone</p> <div style="border: 1px solid #ccc; padding: 2px;">(GMT-05:00) Eastern Tir ▾</div>
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7. Click Organizations on the left to edit your organization name, division, bureau, and job title.

Close Save

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Manage Groups	Organization (Fields marked below are required)	
Account	Organization Name	Department / Division
Contact	<input type="text"/>	<input type="text"/>
Address		Bureau / Section
Organization		<input type="text"/>
Professional Role		Title
Work Settings		<input type="text"/>
Demographic Information		
Michigan Volunteer Registry		
FEMA Student ID Number		
Professional License		

8. Click Professional Role to select your profession.

Close Save

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Manage Groups	Professional Role (Fields marked below are required)	
Account	Please take a minute to review all roles before making your selection.	
Contact	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.	
Address		Primary
Organization	<input type="checkbox"/> Allied Health Professional	<input type="radio"/>
Professional Role	<input type="text" value="--Select--"/>	<input type="radio"/>
Work Settings	<input type="checkbox"/> Administrator / Director / Manager	<input type="radio"/>
Demographic Information	<input type="checkbox"/> Administrative Support Staff	<input type="radio"/>
Michigan Volunteer Registry	<input type="checkbox"/> Animal Control Specialist / Veterinarian	<input type="radio"/>
FEMA Student ID Number	<input type="checkbox"/> Biostatistician	<input type="radio"/>
Professional License	<input type="checkbox"/> Childcare Provider	<input type="radio"/>
	<input type="checkbox"/> Communicable Disease / Infection Control Staff	<input type="radio"/>

9. Click Work Setting to select your primary work setting.

Close Save

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Manage Groups	<h3>Work Settings (Fields marked below are required)</h3> <p>Please select up to three (3) Work Settings that best fit your work environment. Choose Subcategories where applicable.</p> <p style="text-align: right;">Primary</p> <table border="1"><tr><td><input type="checkbox"/> Academic / Educational Institution</td><td><input type="radio"/></td></tr><tr><td><input type="text" value="--Select--"/></td><td></td></tr><tr><td><input checked="" type="checkbox"/> Official Public Health Agencies</td><td><input checked="" type="radio"/></td></tr><tr><td><input type="text" value="State / Territory"/></td><td></td></tr><tr><td><input type="checkbox"/> Military</td><td><input type="radio"/></td></tr><tr><td><input type="checkbox"/> Other Government Agencies (except Military)</td><td><input type="radio"/></td></tr><tr><td><input type="checkbox"/> Healthcare Services</td><td><input type="radio"/></td></tr><tr><td><input type="text" value="--Select--"/></td><td></td></tr><tr><td><input type="checkbox"/> Indian Health Service</td><td><input type="radio"/></td></tr><tr><td><input type="text" value="--"/></td><td></td></tr></table>	<input type="checkbox"/> Academic / Educational Institution	<input type="radio"/>	<input type="text" value="--Select--"/>		<input checked="" type="checkbox"/> Official Public Health Agencies	<input checked="" type="radio"/>	<input type="text" value="State / Territory"/>		<input type="checkbox"/> Military	<input type="radio"/>	<input type="checkbox"/> Other Government Agencies (except Military)	<input type="radio"/>	<input type="checkbox"/> Healthcare Services	<input type="radio"/>	<input type="text" value="--Select--"/>		<input type="checkbox"/> Indian Health Service	<input type="radio"/>	<input type="text" value="--"/>	
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10. Click Demographic Information to add optional demographic information.

Close

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Demographic Information

(Fields marked below are required)

Please select appropriate demographic information (optional).

Education level (highest attained)

Sex

Ethnicity

Race

Birth Date

Primary Language

Secondary Language

11. Click Michigan Volunteer Registry if you would like to identify whether or not you would be willing to volunteer during an emergency.

Close

Save

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Michigan Volunteer Registry

(Fields marked below are required)



Please indicate below if you are willing to volunteer in the event of an accidental, natural, or intentional public health emergency.

For more information about the MI Volunteer Registry, visit <http://www.michigan.gov/ophp>

To go directly to the MI Volunteer Registry site, visit <http://www.mivolunteerregistry.org>

I would be willing to volunteer in the event of an accidental, natural, or intentional public health emergency.

Yes

12. Click the FEMA Student ID Number to add a FEMA Student ID if you have one.

Close

Save

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Organization
Professional Role
Work Settings
Demographic Information
Michigan Volunteer Registry
FEMA Student ID Number
Professional License

FEMA Student ID Number

(Fields marked below are required)

If you have a FEMA Student ID Number please enter it in the field below.

FEMA Student ID Number

13. Click Professional License if you have professional license numbers you want to add.
14. Make sure to click Save to save all changes.

Close

Save

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Manage Groups

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Contact

Address

Organization

Professional Role

Work Settings

Demographic Information

Michigan Volunteer Registry

FEMA Student ID Number

Professional License

Professional License

(Fields marked below as required)

Please enter the appropriate information (optional)

ASHA Account Number

AAA Academy ID Number

NABP e-profile ID Number

Click Save to save your updates.