Welcome to SERV-NV Registration User Guide

State Emergency Registry of Volunteers NEVADA (SERV-NV)

Be Prepared! Get Involved! Volunteer!

- Nevada has been working on a way to ensure volunteers are easily accessible during emergencies.
- SERV-NV was developed to collect and maintain volunteers who are able to provide assistance to an affected area during a disaster or public health emergency.
- It is now required that all volunteers register with SERV-NV prior to deployment.

This presentation will walk you through the registration process!

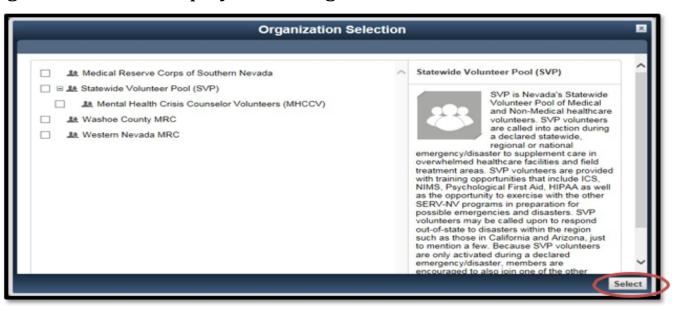
First Steps:



The first thing you will be asked to do is **Add an Organization**. Click **Add Organizations**

Organizations		
Organizations represent official groups that you have aff those you want to join.	iliation with as a SERV-NV user. Click the Add Organizations link below to see	a complete list of organizations and select
Add Organizations Organization(s):		

Next you will see a list of options, check the box(es) of the groups you want to join, then click **Select.** *Note: If you click on the groups, a short description of each organization will display on the right.



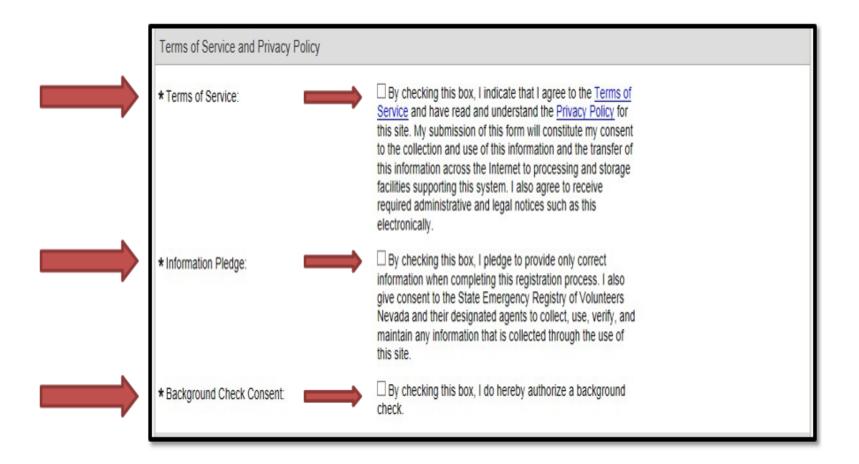
Account Information:

- Add Username and Password and Confirm Password Keep it secret, keep it safe, 🕑 but if you lose it, no worries, you can request a password reset by clicking on the 'Forgot Username or Password?' link located on the Home/Sign-in page.)
- Select a secret question and provide an answer.

Account Information		
Creating an account is the first step in the S you log into the State Emergency Registry of	State Emergency Registry of Volunteers Nevada registration process of Volunteers Nevada.	s. You will use your account username and password each time
* Username:	The username must be at least six (6) characters long and cannot contain spaces. Acceptable characters include alphanumeric (A-Z, 0-9) and the symbols @, ., -, and Usernames are not case sensitive.	
* Password: * Confirm Password:		 Password must be 8 characters or longer Password must contain a number Password must contain a special character Password must contain uppercase letter Confirmation password must match
* Secret Question: * Secret Answer:	Select 🗸	

Terms of Service and Privacy Policy:

Read all Terms of Service, Information Pledge, and Background Check Consent, then agree by **checking** the boxes next to each one.



Name and Address Information:

Next, enter your Name and Address information.

Name and Address	
Prefix:	Example: Dr., Col., Mr., Mrz., Ma.
* First Name:	
Middle Name:	
* Last Name:	
Suffix:	Example: Jr., Sr., MD., PhD, RN
* Address Line 1:	
Address Line 2:	
* City:	
* State:	Nevada 🗸
* County or Tribe of Residence:	County Tribe If you are a tribal member, a tribal designee, or currently employed by a tribal government, please enter a Tribe of Residence.
* Zip Code:	
Alternate Address Line 1:	
Alternate Address Line 2:	
City:	
State:	Select V
Zip Code:	

Contact Information:

Next, enter in your **Contact Information**.

Although one (1) is required, you can add up to two (2) email addresses and five (5) phone numbers. You can also arrange which phone number you want called as a 1st attempt, 2nd, etc., by using the arrows on the right-hand side next to each number.

Contact Information		
Primary Email Address		×
* Email Address:	If you have an email account, it is important for you to provide this information. Without your email address, you may miss important messages and notifications. Please note that the system will not allow two accounts with the same email address. If you do not have an email address or your email address is already registered with the system, you can learn more about obtaining a free email address by <u>clicking</u> here.	
* Confirm Email Address:		Add Email Address
Contact Method 1		×
* Contact Method 1: * Number to Attempt:	Select V	+ Add Another Contact Method

Occupation Information:

Occupation Information	
* What is your occupation type?	Select

Select **Medical** or **Non-Medical**, then select your occupation and the current status. *Note: The occupations list is arranged in alphabetical order, broken into two occupation types, medical and non-medical.

Decupation Information					
* What is your occupation type?	Medical				
* Occupation:	Select	v			
	If your occupation does not appear in the list, please select Other.				
* What is your current professional status for this occupation?	Select	✓			
		Previous			



Once you click **Next**, the "Attention Required" notice show below will appear:

Attention Required	×
Alert 1 of 1	
Congratulations, you are now registered for the State Emergency Registry of Volunteers Nevada	
Your initial registration for the State Emergency Registry of Volunteers Nevada is now complete. However, additional information is needed in order to make you eligible for potential deployments. Pleat take the time to fill out all of the sections listed in your Profile Summary.	ase
This message will appear each time you return to the Home page until all sections are completed. If you would like to set your primary Organization, please click <u>here</u> .	

Click on **Profile Summary** to complete your profile.

All of the following pages can be seen in **My Profile.** Please visit each section to fill in the required information. At the top of each page there is an **Edit Information** button. After you have filled in your information, scroll to the bottom and click **Save Changes**, then move on to the next section.

SERV) BE PREPARED, GET INVOLVED VOLUNTEER!	
Welcome, Jabby Tester (Log Out)	Kelp
Home My Profile Messages Organizations Accountability	
Summary Identity Peployment Prefs Contact Occupations Training Skills & Certifications Medical History Background Check Settings	
	PRINT VIEW 🛲
Summary	
32 % Complete	
In order to make you eligible for potential deployments, all profile information must be complete. Please take the time to fill out each section below.	
 Veur name, our marke, our methad adverse, physical characteristics, and ability to operate a longende missing) Your name, our methad adverse, physical characteristics, and ability to operate a longende metry velocities. Deployment Preferences (incomplete - required fields missing) Your availability for deploymenta, activity preferences for deploymenta, and existing emergency response convoltmenta. Contact (incomplete - required fields missing) Your contacts information and emergency contacts for use during a deployment. Occupations (incomplete - must complete occupations) Your professoral excertaines Credentiats are the formation and emergency contacts for use during a deployment. Credentiats are the formation and emergency contacts for use during a deployment. Credentiats are the formation and emergency contacts for use during a deployment. Credentiats are the formation (incomplete - must complete occupations) Your contact information (incomplete - page not visited.) Credentiats are the formational qualifications your prior deployment history. Skills and Certifications (complete - page not visited) Your expertise to be considered for deployment eligibility and your prior deployment history. Medical History (incomplete - page not visited) Your basit conditions that may affect deployment eligibility and your vaconation history. Background Check (incomplete - required fields missing) Your background check may affect deployment eligibility. 	

When you have successfully saved your data, you will see the green Success bar at the top.

Identity	
Edit Information	
Success Your profile has been updated.	

You can use the **tabs** at the top to **visit each section**, or you can use the **Summary** tab to see the areas you have not yet visited.

Summary Identity Deployment Prefs Contact Occupations Training Skills & Certifications Medical History Background Check Settings

*Note: On the **Summary** tab, the **Skills & Certifications** section will already be **green** indicating it is complete even if no information has been entered. Please be sure to visit this page as well to add any information you think would be relevant.

*Note: On the **Summary** tab, the **Training** and **Medical History** sections will turn **green** indicating they are complete once you have visited them, even if no information has been entered. You can come back anytime to make changes.



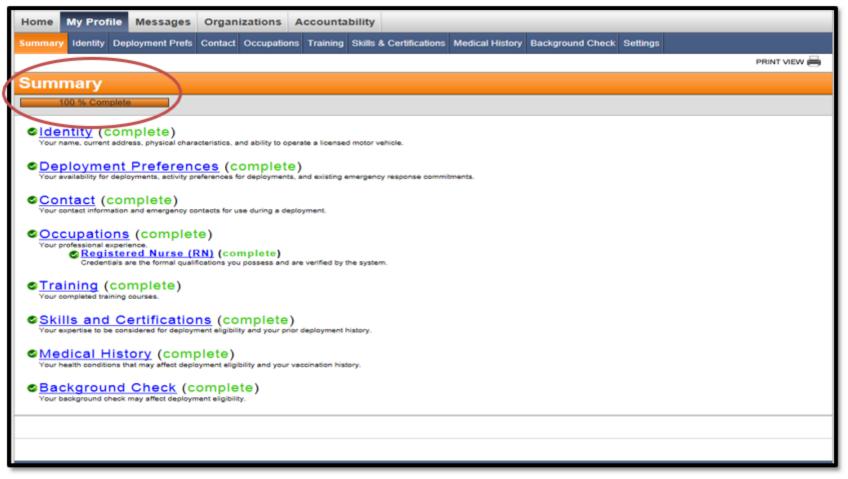
Also within **My Profile** is the **Settings** section.

Within the **Settings** tab, you are able to:

- Change your Account Status
- Change your Username
- Change your Password
- Change your Security Question
- Change your Display Preferences



Once you have completed each section, go back to the **Summary** tab to review.



Your profile should be at 100% complete.

After your profile is complete, the next time you log in, it will take you to the **Home** tab. From there you can view any updates or any messages you may have received since the last time you logged in.

Home My Profile	Messages	Organizations	Accountability
<u> </u>			
Home			
		Updates	
			You don't have any updates.
		Recent Messag	jes
Your profile is: 100 % Complete Registered Nur			You don't have any messages.
Account Status: Active	e		
Organizations:			
Last Logged In: 6/16/2014			

On the **Messages** tab, you can view all of your messages, and you can send messages to the organization coordinator/administrator.

Home My Prof	Messages	rganizations	Accountability				
General Messages							
							REQUIRED (*)
General M	essages						
Compose							
Inbox		💶 💽 Inbox				Actions	• 1
Sent		Check All 🔻					0-0 of 0
Drafts		Subject		Sender	Date	✓ Delete	
Trash							
				Nor	results found.		
							0-0 of 0
						Results Pe	r Page: 50 🗸

From the **Organizations** tab, you can view which organization(s) you are apart of and check your status. From here you can also withdraw from an organization.

Welcome	Welcome, Division of Public and Behavioral Health (Log Out)							
Home	My Profile	Messages	Organizations	Accountability				
My Orga	nizations All (Organizations						
								PRINT VIEW
My C	Organiza	tions						
_	ort By Organization	Ŧ	Display Filter Status: All		¥			
								1-1 of 1
	Organization	1				Status	Primary	
	Statewide Vo	lunteer Pool (SVP) <i>"</i> D <u>ashboard</u>			Pending	合	Withdraw

If you click on **All Organizations** you will see a list of the organizations that are available for you to join. Simply click on the title of the Organization, then click the **Join** button located above the Organization description on the right.



Contact Us

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Western Nevada Medical Reserve Corps Jessica Rapp - jrapp@carson.org Sydney Gamer - sgamer@carson.org

Battle Born Medical Corps Volunteers and Statewide Volunteer Pool Tabatha Hart - <u>thart@health.nv.gov</u>