

## To Create a TRAIN Virginia Account

### 1. Go to <https://va.train.org>

The screenshot shows a login form with two input fields: "Login Name" and "Password". Below these fields is a blue "LOGIN" button. Underneath the login button is a checkbox labeled "Remember My Login Name and Password" and a link "Forgot Your Login Name/Password?". Below this is a separator "-OR-" and a blue "CREATE ACCOUNT" button. At the bottom of the form, there is a small link: "To add your course to TRAIN: Become a Course Provider".

Select "CREATE ACCOUNT"

### 2. Accept the Terms & Conditions

Please read the following TRAIN policies carefully. If you agree to these policies, check the box below to continue with the registration.  
Note: You must agree to these policies to be able to access the TRAIN website.

#### TRAIN Policies

1. General Policies and Liability Terms
2. Confidentiality Statement
3. Learner Rights and Responsibilities
4. Course Provider Rights and Responsibilities
5. Definitions

I agree to these TRAIN policies

Next Cancel

Agree to terms and select "Next"

## Enter Account Information

**Required Fields**

Login Name \*

Password \*

Confirm Password \*

First Name \*

Last Name \*

Position Title \*

Telephone (daytime) \*   
Example: (777)777-7777

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 \*

### Optional Fields

Middle Name

Telephone (evening)

Daytime Extension

Pager

Fax

Mobile

Bureau/ Section

Address 2

- I would like to receive emails from TRAIN
- I would like to receive notifications about the site updates by email.

Use the same email listed in VVHS

In the Organization name field, enter the health department name (e.g. Alexandria Health Department)

In the Department/Division field, enter: EPR/MRC

In the Bureau/Section field: enter "MRC"

Select that you would like to receive emails from TRAIN (You will only receive emails related to your courses).



**Select your location, agency and/or job role**

On the next page, you will be asked to select your job role and agency.

**Please select from the dropdown menus below your location, agency and/or job role as appropriate.**

Select Job Role  Select Agency/Industry

The Job Role is asking if you are a certified EMS provider – select the appropriate answer.

In the ‘Select Agency/Industry’ dropdown, please select State Agency. This will then pop-up another box called ‘Select Office or Department.’ Please select Department of Health. Another box will be added called ‘Select Office or Department.’ Please select Virginia Health Districts.

In the ‘Select Agency/Industry’ dropdown, as you select the answers shown below, additional dropdown boxes will appear until you see the screen below. Please select these exact answers in the dropdown boxes!!!

**Please select from the dropdown menus below your location, agency and/or job role as appropriate.**

Not a Virginia Certified EMS Provider  State Agency   
Department of Health   
Virginia Health Districts   
Alexandria Health District   
Alexandria City

Please make these exact selections to be able to receive account support from your MRC Coordinator.

Select your MRC unit from the dropdown menu and corresponding city/county (if listed).

Home

Course Search

Help

Competencies

About This Site

Are you a member of the Medical Reserve Corps (MRC)?

Yes

No

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Select "Yes"

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Competencies

About This Site

Please select from the dropdown menus below your location, agency and/or job role as appropriate.

Alexandria Medical Reserve Corps

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Select your MRC unit from the dropdown menu.