

## CITI TRAINING INSTRUCTIONS

### For Good Clinical Practice Training

Initial visit to the training

To begin:

1. Go to CITI at <http://www.citiprogram.org>
2. Click on **Register**

Complete Registration Steps 1-7 now:

Step 1:

1. In **Section 1. Select your Organization Affiliation**  
Type in University of Colorado Colorado Springs

Step 2: Personal Information

1. **Enter your name**  
Enter first and last name
2. **Enter your email address**  
Enter your UCCS email as the preferred email; if you have a non-UCCS email account where you would like a copy sent, enter it in the secondary email

Step 3: Create your Username and Password

1. **Enter your User Name**
2. **Enter and verify your Password**
3. **Select and provide an answer to a Security Question**

Step 4: Country of Residence

1. Enter full or partial country name OR the 2-3 character abbreviation for your country.

Step 5: Continuing Education Unit (CEU) Credits

1. Review the information about CEU Credits (Note UCCS does not track CEU Credits)
2. Select "yes" or "no," depending on whether or not you're interested in CE credits.
3. Optional: only answer this question if you selected "yes" on question number two.  
If you answer this question, select the type of CE credit you'd like to earn.
4. Question about CITI contacting you at a later date regarding future research surveys (this is your choice)
5. Select "yes" or "no," depending on whether or not you want CITI to contact you with marketing information.

#### Step 6: General Demographic Information For UCCS

1. *Language Preference* select your language preference for the training
2. *Institutional email address* is your UCCS email account
3. *Gender* use the drop down to select
4. *Highest degree* use the drop down to select
5. *Employee Number* enter if you have one, or provide the last 4 digits of Student
6. *Department* enter the department name for which you are completing the training
7. *What is your role in research?* use the drop down to select
8. *Address Field 1:* enter 1420 Austin Bluffs Parkway then skip to City
9. *City:* enter Colorado Springs
10. *State:* enter Colorado
11. *Zip/Postal Code:* enter 80918
12. *Country:* enter United States
13. *Office Phone:* enter your best contact number
14. *Home Phone:* enter or skip, field is optional

#### Step 8: Learner Registration

1. Under *choose all that apply*  
Select the first entry **I would like to enroll in the Good Clinical Practice (GCP) course** if you are taking the training so you can undertake research for a class project, capstone project, or thesis.
2. Under *choose one answer*  
Select the last entry **GCP—Social and Behavioral Best Practices for Clinical Research.**
3. Click **Next**  
You should be at the confirmation page for the course registration.

