

Accounts and Membership



The Oklahoma Professional Development Registry (OPDR)

How to Register a Direct Care Organization

Note: Organizations should be registered by the approved Department of Human Services (DHS) contact only.

To register your direct care organization, you will need to have an individual account.

If you do not have an individual account, follow the steps under “How to Create an Individual Account.” When that is complete,

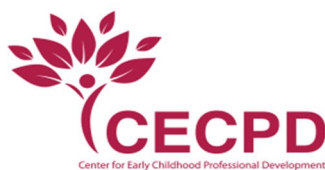
If you already have an individual account, follow the steps to “Register your Direct Care Organization” starting on page 8.

How to Create an Individual Account

Sign up for an **OPDR Individual Account**.

- Go to www.okregistry.org
- Click on **Log In** in the upper right corner

Click on **Create Account**.



Powered by INSIGHT

Email Address

Password

Remember me

[Forgot Password?](#)

Accounts and Membership

Enter the requested information and click on **Create Account**.

Create Your Insight Account


Please enter the required info below to begin creating your secure account.

First Name


Middle Name

Last Name

Email Address




The OPDR will send you an email for verification. Click **OK**.



Email Verification Sent

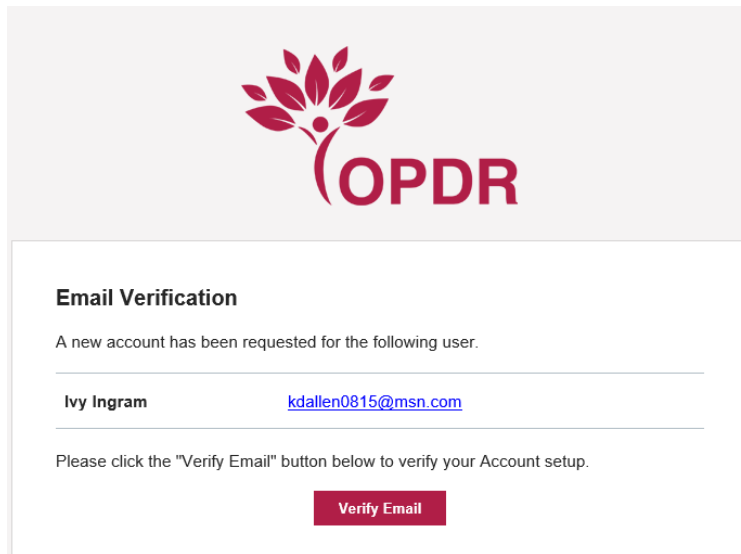
Look for a verification email sent to the email address you provided.

Please follow the instructions within the email to verify the email address.



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Click on **Verify Account**.



After verifying your account, you are required to update your password. Click on **Save Password** when finished.

Create Password

Please create a new password for your account.

New Password

The Password field is required.


Re-enter New Password

Save Password

Password Requirements

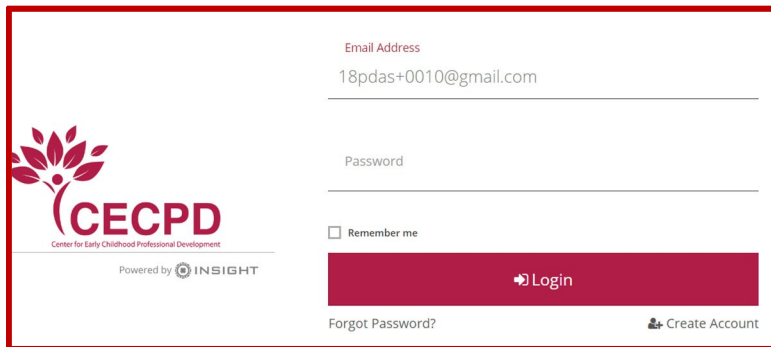
Valid passwords must consist of the following:

- Minimum of 7 characters
- At least one capital letter
- At least one number

 Special characters such as '&' or '!' are encouraged but not required.

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When you click OK you will be directed to the login screen.



Email Address
18pdas+0010@gmail.com

Password

Remember me

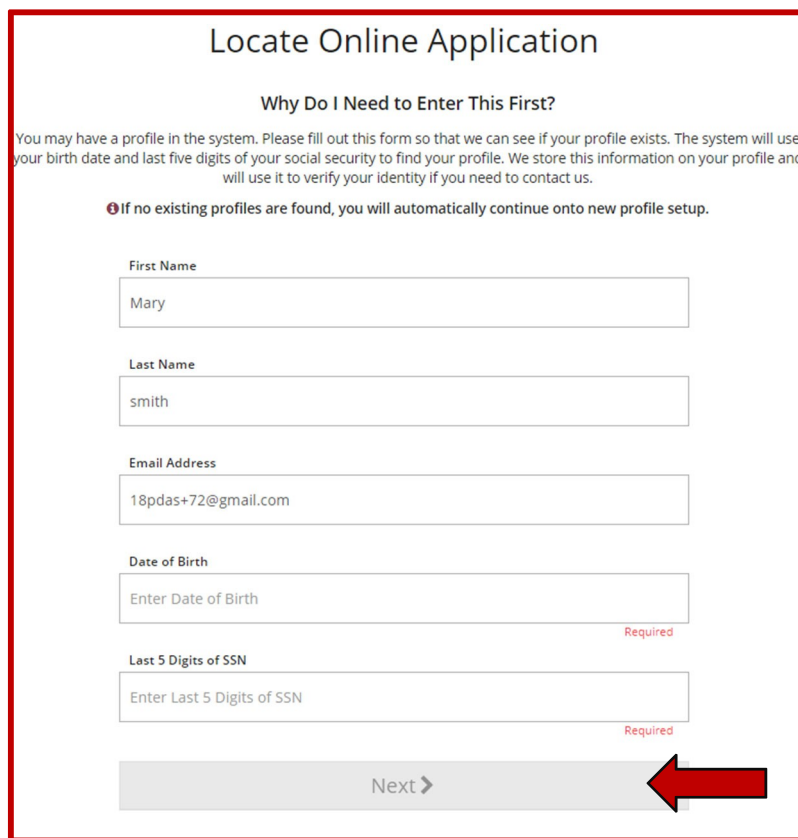
[Login](#)

[Forgot Password?](#) [Create Account](#)

CECPD
Center for Early Childhood Professional Development
Powered by INSIGHT



Complete the information, then click **Next**. The OPDR will look for an existing Individual Account.



Locate Online Application

Why Do I Need to Enter This First?

You may have a profile in the system. Please fill out this form so that we can see if your profile exists. The system will use your birth date and last five digits of your social security to find your profile. We store this information on your profile and will use it to verify your identity if you need to contact us.

! If no existing profiles are found, you will automatically continue onto new profile setup.

First Name
Mary

Last Name
smith

Email Address
18pdas+72@gmail.com

Date of Birth
Enter Date of Birth
Required

Last 5 Digits of SSN
Enter Last 5 Digits of SSN
Required

[Next >](#)




If you previously had an Individual Account, it will be located with the last 5 (five) digits of your Social Security number and birthdate. If your account is found, you will need to verify the profile belongs to you by checking the box then click on **Claim Profile**.

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Profile Found

We found a Registry profile that matched your information.
Please review the profile below to claim it.

👤 Jennifer Harristest (#72)
📍 Oklahoma City, OK 74014
✉ Jennifer.Harristest@email.com
📅 Created on 03/09/2011

 I verify this profile belongs to me.

[Claim Profile](#)

ⓘ Upon clicking "Claim Profile", you will gain access to your individual profile as well as any linked organization profiles.

Not You?

If this profile does not belong to you, please contact support.

[Contact Support](#)

If no account is found, you will be directed to complete the application process for your Individual Account.

An online application was not found using the information you provided.

**If you have ever applied to the Oklahoma Registry in the past, do not proceed.
Call toll-free: 888-446-7608 or 405-799-6383 for assistance in locating your account.**

Please enter the following to begin the Oklahoma Registry online application process.

For your Individual Account please have available:

* Indicates a required field

- A mailing address
- A home address
- A primary phone number
- Your previous or maiden name, if applicable

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Once you enter this information and click on **Next**, your mailing address will be verified with the United States Postal Service (USPS). What you entered and what the USPS recommends will be displayed on the screen. To ensure mail is received, please select **Use USPS Address**

Mailing Address Verification ✕

⚠ Address Verification Required
According to the USPS, the mailing address you entered doesn't appear to be in the proper format.

<p>📍 Original Address</p> <p>1801 n moore ave Oklahoma City, OK 73160</p>	<p>📍 USPS Recommendation</p> <p>1801 N MOORE AVE MOORE, OK 73160-3668</p>
<p>Use Original Address</p>	<p>Use USPS Address</p>

Enter your Communication Preferences and click on **Next**.

Communication Preferences

What is This?

We may send period communications related to the registry in addition to emails about your account. If you do not wish to receive informational emails, uncheck the box below.

ⓘ Please note you will continue to receive emails about your account.

Yes, I wish to receive informational emails from the registry. If you do not select this option, you will still receive emails about your account.

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After you review and accept the Privacy Policy, click on **Submit**.

By checking this box You acknowledge You have carefully read the forgoing authorizations, fully understand the meaning of the waivers contained in these Terms and Conditions, and understand You are entering into a legally binding contract. You affirm that You sign this agreement with the intent to be legally bound thereby and agree to these Terms and Conditions voluntarily. You agree this transaction may be conducted by electronic means and hereby state that by checking this box, You manifest Your intent to electronically sign and agree Your electronic signature shall have the same force and effect as an original signature.

[← Back](#) [Submit](#)



Clicking **OK** take you to your individual account. If you want to register a Direct Care Facility, please proceed to page 8.



Welcome to the Oklahoma
Professional Development Registry

Your profile setup is complete.

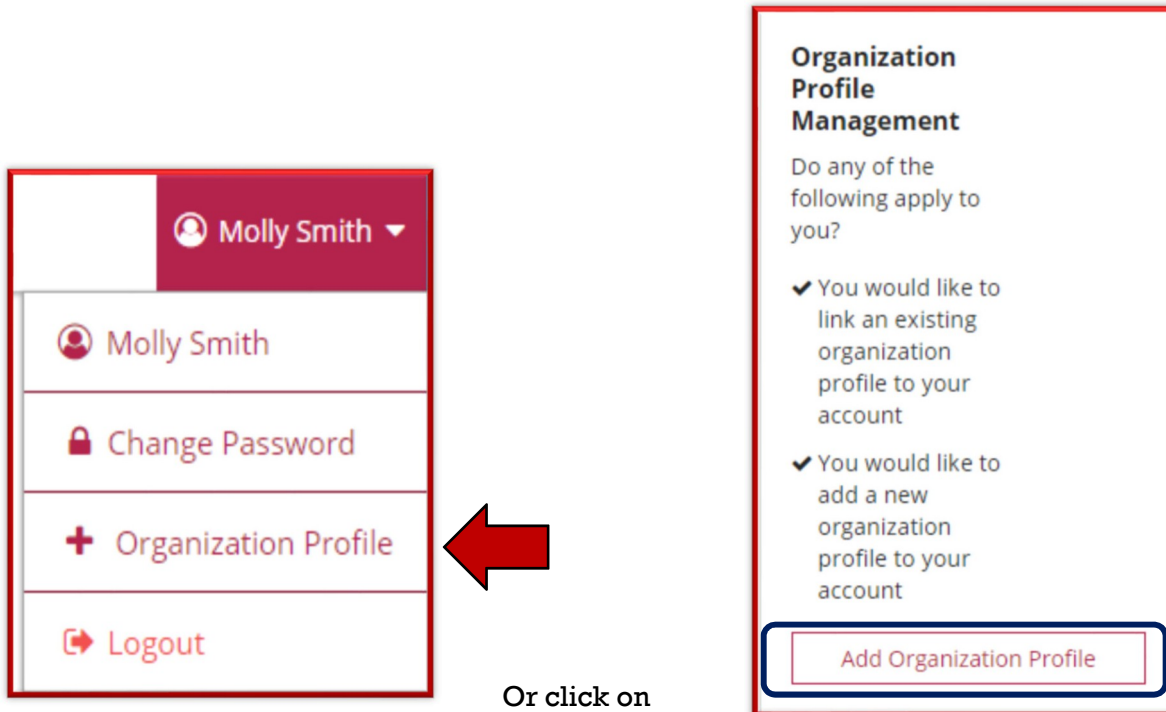
[OK](#)

Organization Profiles

Register your Direct Care Organization

Go to www.okregistry.org and click on **Login** to your individual account. Enter your email address and password.

There are two ways to add an Organization Profile. Click on **+ Organization Profile** from the drop-down menu or **Add Organization Profile** on the right-hand menu.



Or click on

Organization Profiles

Click on **Create Profile**

Organization Profile Lookup

Please enter the organization ID to request access to the organization profile. This is not a license number.

Organization ID

Find Profile

Need a New Organization Profile?

If you need to create a new organization profile, please click "Create Profile" to begin organization profile setup.



Verify the information in the boxes and enter a phone number. Click on the radial button for: Yes, the organization provides direct care or PDC services to children and families.

Contact Info ID Numbers Organization Type Address

Organization Registration

Please fill out the form below to register your organization. Fields marked with * are required. Use the [Contact Us](#) form if you have any questions or concerns about the organization registration process.

Contact Information


First Name* Last Name*

Email Address*

Phone - - Ext.

Are you an early childhood or school age program?

This website is designed to serve a wide variety of organizations in the early learning and school-age care field. Some organizations work directly with children while others work with the adults who educate and care for children, and still others work in the community more broadly. Your organization may do more than one of these. In this question, we want to identify whether your organization provides care and/or education directly to children. Your organization may also provide other supports and services, but please indicate here whether one of the supports your organization regularly provides is direct care and education to children.

 Yes, the organization provides direct care or PDC services to children and families

No, this organization does not provide direct care and/or education to children

Next »

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If you are licensed with DHS, you will click on the “Yes” radial button. Enter your licensed number. You will need to include the K8.

Organization Identification

You indicated that this organization provides early learning and/or school age care to children. Let's gather some identifying information for this organization. **Answer Yes or No to all questions.**

Are you licensed?
Provide your license number below beginning with K8. This is a 10 digit number.

Yes

 Enter your license number (required)

 No

Is your agency part of the Professional Development Collaborative (PDC)? For all Direct Care Organizations, the answer to this will be **No**.

Is your agency a part of the Professional Development Collaborative (PDC)?

The Professional Development Collaborative is a cross-sector workgroup providing services to children and families in Oklahoma.

Yes. Please specify your organization type:

- PDC State Agency
- PDC Organization Affiliated With State Agency

Select your PDC State Agency (required)

 No

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Are you a Head Start grantee or Head Start site? If you are, click the radial button that applies to your organization, then select your grantee using the pull down. If you are not a Head Start program, select **No**.

Are you a Head Start grantee or Head Start site?

If your organization receives Head Start funding to offer direct services to children and families, please indicate whether your organization is the grantee (primary recipient of the Head Start dollars) or a Head Start site (a site selected by the grantee to be the physical host for Head Start supports).

Yes. Please specify your organization type:

- Head Start Grantee
- Head Start Site

Select your Head Start grantee (required)

-- Make a Selection -- ▼

No

Are you a child care program in partnership with Head Start? If so, check “Yes” and select your grantee. If you are not in a partnership with Head Start, select **No**.

Are you a child care program in partnership with Head Start?

If you are a child care program that partners with Head Start, select the Head Start grantee.

Yes

Select your Head Start grantee (required)

-- Make a Selection -- ▼

No

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Are you a program within a school district? This question is asking if you are a Head Start program located in a school building. If your program is in a school, check the “Yes” radial button and select your school. If not, select **No**.

Are you a program within a school district?

If your organization is an official program of a school district, we'd like to know with which school you are affiliated.

Yes

Select your school (required)

-- Make a Selection --

No

Are you a regulated child care program in partnership with a school district? This question is asking if you are licensed program with a contracted partnership with a school district. If you are contracted, respond “Yes”, if not select **No**.

Are you a regulated child care program in partnership with a school district?

If you are a regulated child care program in partnership with a school district, select the school district.

Yes

Select your school district (required)

-- Make a Selection --

No

Click the “Next” button

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When you click “Next” the system will look for your program information. If the organization is already registered, you will receive a notification on the screen.

Please correct the following errors before continuing:

▲ License Number: The program you entered has already been requested by another organization.

If it is not registered the system will display some general program information on the screen. Confirm the information. If correct, click “Next.” If incorrect, contact the OPDR. Help information is on the last page.

We found the following program data using the license number you provided. Confirm the program(s) found are correct.

Testing, Test

Address

Contact: [Redacted]

License Number: [Redacted]

Effective: 7/31/2018

Organization Type Details:

1. **Training Sponsor Organization:** here you will let the OPDR know if you want to be an “Approved Training Sponsor.” If you are not sure, do not select anything. You can always contact the OPDR if you change your mind.
2. If your program is **Accredited**, use the pull down to select the accrediting agency.

Organization Type

Training Sponsor Organization

Check if your organization is a sponsor of training events. Doing so will allow you to enter training events into the system.

Include organization in Public Approved Sponsor Directory
Indicates if this organization is available for Public Approved Sponsor Directory search.

CEU Provider
Check if your organization will enter Continuing Education (CEU Courses) into the registry system.

Program Accreditation

Select the accreditations your program holds

-- Select Accreditation --

Add

Next »

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Program Capacity: Here you can indicate the number of classrooms you have and the age breakdown of the children in your care.

Program Capacity

Program Capacity is the amount of children listed on your license issued by Oklahoma Department of Human Services.

Number of Classrooms / Groups

Total Number of Children Enrolled **0**

Infants (0-12 months)	<input type="text" value="0"/>
Toddlers (13-24 months)	<input type="text" value="0"/>
Two's (25-36 months)	<input type="text" value="0"/>
Preschooler 3's (37-48 months)	<input type="text" value="0"/>
Preschool 4's and 5's (49-72 months)	<input type="text" value="0"/>
Elementary (K-3rd grade)	<input type="text" value="0"/>
Middle (4th-8th grade)	<input type="text" value="0"/>
Secondary (High School)	<input type="text" value="0"/>

Once you have entered your enrollment age information, click the "Next" button.

The last page details the organization address and your communication preferences. Complete the required fields and click "Submit."

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Organization Address

Organization Name*

Testing, Test

Physical Address

Address Line 1*

Line 2

Zip*:

City*

State*

OK ▾

County*

Country

United States ▾

Mailing Address

Same as physical address

Address Line 1*

Line 2

Zip*:

City*

State*

OK ▾

County*

Country

United States ▾

Phone*

405 - 242 - 2971

Fax

- -

Web Site

Additional Info

Enter any additional information about your organization that you would like to appear on this web site.

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Select your communication preferences and click **Submit**

Communication Preferences

The CECPD sends periodic communications.

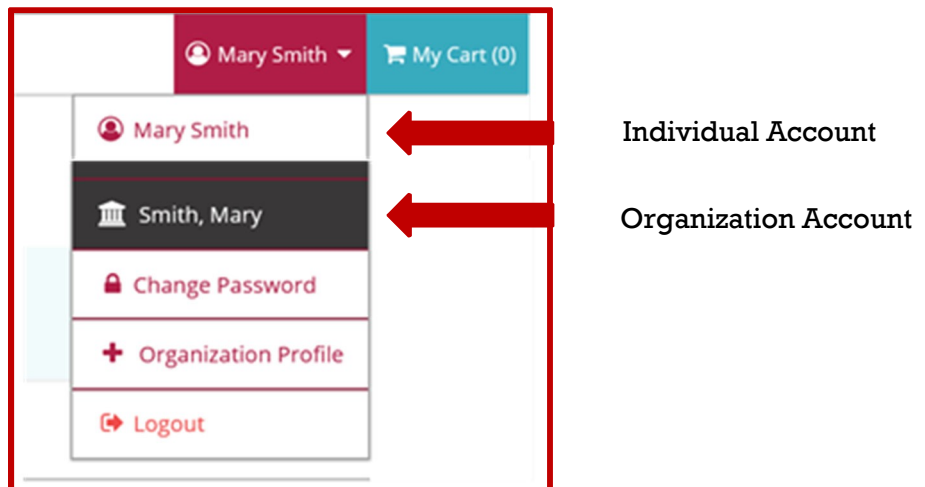
Unsubscribe
You will continue to receive emails regarding your account.

Subscribe
You will receive informational emails from CECPD in addition to emails regarding your account.

 **Submit**

When you click the “Submit” button your organization profile is put into a Pending status. Your organization will be reviewed by the OPDR staff. Please allow 24 hours for processing. When approved you will receive an email letting you know your organization is registered.

The next time you log into your individual account, you will be able to rotate between accounts without logging out and in.



NEED HELP?

Contact the OPDR at:

- 888-446-7608
- cecpd@ou.edu
- Available by phone Monday through Friday from 8:00 a.m. to 5:00 p.m.