How to Create your EDS (eCertification) Account

There are two parts to this process: Part I, create your account in EDS and Part II *activate* your account in eCertification. You must enter your Social Security Number in full during Part II.

PART I: CREATE ACCOUNT

- Go to <u>https://eds.ospi.k12.wa.us</u>
- Select the Create an Account tab.

Sign In C	reate an Account
ě ds	System Sign In
Username	Username
Password	Password
	Login
Forgot your u	sername or password?

• You will see the form below: Complete the **Required Login Information** and **Data for Linking to** a **Certificate** sections.

Sign in Create an Account	
Enter desired username and password in the boxes below. Username must be a valid email address. Passwords must be at least <u>8 characters long</u> , contain at least: one uppercase letter, one lowercase letter, one number, and one symbol.	
Optional demographic information can be entered below for the purpose of linking a new account to an existing teacher certificate.	
Required Login Information	
Birthdate: (format: MM/DD/YYYY)	• Username must be a valid email address.
Username:	
Verify Password:	If any support to a support of the state of
Data for Linking to a Certificate Gender: O Male O Female Not Specified	state certificate, then you must report
Certificate:	this data.
Contact Email:	\circ If not, then leave blank.
Register	
	J

Select Register. •

The form below will open. Complete all entries and then click Create Account.

All fields marked with an asterisk (**) must be completed. You may edit your personal information on this page, including the email address used for your username, at any time. The information on this page is secure and OSPI will not share it. We will use the information on this page to contact you with official OSPI business only. Please complete all required fields. When finished, click the Create Account button.

	Create Account		
Personal Informatio	on (Information provided here may be used to verify	your EDS acco	ount)
* First Name:	Cynthia	Gender:	○ Male ● Female ○ Not Provided
Middle Name:		Birth Date:	02/28/1959 (mm/dd/vvvv)
*		HE	
* Last Name:	McVeigh		
Race:	Not Provided	Ethnicity:	Unknown / Not Provided V
Teaching Certificate	a Information		
Cert Number:	-No Certificate-		
Account Informatio	n	-	
* Username:	hrmailbox@sjisd.org	Active:	
	Note: Username must be an e-mail address, e	.g., jsmitn@m	iyschool.edu.
Email Information			
* Primary:	hrmailbox@sijsd.org	Recovery:	clupa228@gmail.com
· · · · · · · · · · · · · · · · · · ·		*	
Home Information ((Information provided here may be used to verify yo	ur EDS account	t and OSPI may send official mail correspondence, such as certificate renewal
information, to this add	iress.)		
Address Line	285 Blair Ave	Address	
City:	Friday Harbor	State:	Washington 🗸
Zin Code:	98250	Country:	Inited States
* Phone Number	- 3603707904	Eav:	
Phone Number	. 3003707904	Fax.	
Business Informatio	on		
Address Line		Address	
1:		Line 2:	
city:		State:	Washington V
Zip Code:		Country:	United States
Phone Number		Fax:	
	Create Account		
,	<u>Privacy Policy</u> > <u>Disclaimer</u> > <u>Customer Suppo</u>	ort: 1.800.725.4	4311 ©Copyright 2004 - 2021

* * * * * * * * * * NOTICE * * * * * * * * * * EDS is maintained by the Office of Superintendent of Public Instruction (OSPI) for only authorized and official uses as described in the EDS Security Management Policy (http://www.k12.wa.us/EDS/default.aspx). All system activity is monitored and logged by OSPI. Since this system contains sensitive and confidential data, users must take the necessary precautions to prevent unauthorized disclosure of data. By continuing to use this system you indicate your awareness of and consent to these conditions of use. Please report violations to your District Data Security Manager or OSPI Customer Support. I DO NOT AGREE

I AGREE

PART II: ACTIVATE ACCOUNT

• Log back into your newly created account to activate it. Log in and click View My Applications.



• You should see **E-Certification** in the Application list. Click on E-Certification. (If you don't see it, log out and wait another 30 minutes.)



• Next, enter your SSI, and complete all other fields on the form. Click next two more times to complete the form.

| Edit Educator - S | tep 1 of 3 | |
|-------------------|---|--|
| You are editing a | n Educator. | |
| Please review and | or update your profile information and click the Next button. | |
| File Location: | ~ | |
| T | | |
| Teacher Number: | | |
| SSN: | 555125578 * | |
| First Name: | SJISD Demo * | |
| Middle Name: | | |
| Last Name: | Account * | |
| Former Name: | | |
| Print Name: | | |
| Suffix: | ~ | |
| Gender: | Female * | |
| Birth Date: | 11/01/1999 MM/DD/YYYY * | |
| Ethnicity: | * | |
| * Pace: | American Indian or Alaska Native | |
| Nace. | Asian | |
| | Black or African American | |
| | Caucasian or White | |
| | Native Hawaiian or Other Pacific Islander | |
| Educator Status: | Active 🗸 * | |
| | | |
| Once you have er | ntered the required data click on the Next button. | |
| | | |
| Continue - Ple | ase continue the wizard. | |
| O Cancel - Pleas | se cancel the wizard. | |
| | Next 🔿 | |

- Notify HR that you have created and activated your account. (It can take up to 24 hours to become available after this step.)
 - \circ $\;$ HR will now be able to submit the District request for your certificate.
 - HR will notify you when that step is complete and instruct you to claim the request by applying for it.
- Once HR has notified you to apply for your District Request, log back in to eCertification and apply as shown below.Notify HR once again, when you've completed that step.

Apply for Your District Request Here

If a district electronically requests a teaching credential for an educator, a link will be displayed on the educator's home page.



To start the process, the educator clicks on the link, Click here to apply for your Washington District Request. This action will launch the District Request Application List table. The educator clicks on the Begin link for the selected application.

| Available Applications | | | | | | | | |
|---|--|------------------|-----------------------|----------|--|--|--|--|
| | | | | | | | | |
| 4025 - Conditional | | District Request | 5/27/2014 10:42:57 AM | Begin | | | | |
| 4025 - Conditional | | District Request | 5/27/2014 10:42 57 AM | Better . | | | | |
| 6025 - Conditional | | District Request | 5/28/2014 7:20:08 AM | Begin | | | | |
| 8026 - Emergency Certificate | | District Request | 5/28/2014 7:44:27 AM | Begin | | | | |
| 4027 - Emergency Substitute Certificate | | District Request | 5/28/2014 7:58:02 AM | Begin | | | | |
| 4028 - Intern Substitute Certificate | | District Request | 5/28/2014 8:06:29 AM | Begin | | | | |
| 4075 - Initial/Probationary CTE Teacher Certificate | | District Request | 5/28/2014 8 15:30 AM | Begin | | | | |

By clicking on the Begin link, an 18 step wizard is launched. The educator will go through each step for complete the application process.

If you need further assistance with this process, please contact the OSPI Professional Certification office at (360) 725-6400.