

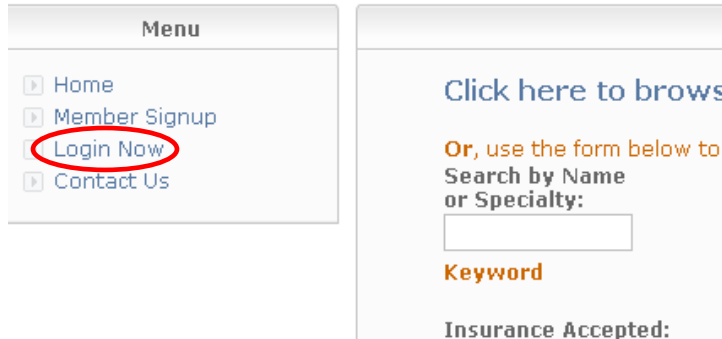
Updating your profile on in the WMassEMDRIA Online Directory

You will need:

- 1) Your username & password

Go to the directory: <http://www.wmassemdria.com/directory/>

And click “Login Now” on the left column.



- 2) Login with your username and password. If you have trouble, try the “Forgot your password” function. If you still have trouble, you can email for support to:

- 3) Once logged in, click “Edit Your Profile” on the left column.




4) This lists all “orders” for your user account.

To edit your profile, click the “Manage Icon” which looks like this:




Western Mass EMDRIA
Regional Network



Orders

1 found, Page 1 of 1


ORDER #	DATE	LISTING TYPE	NEXT DUE DATE	STATUS	PRODUCT STATUS	MANAGE
1504396280	10-15-2012 08:31PM	Private Practice Online Listing and Printed Directory Test Listing for WMassEMDRRIA	10-16- 2012	Pending	Active	

Results 1 - 1 of 1

<< < [1] > >>

5) This page shows additional details about your order, click “Edit”.

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View Order

Order Details

Order #:	1504396280	Listing Type:	Membership Listing - Private Practice Online Listing and Printed Directory
Date:	10-15-2012 08:31PM	Next Due Date:	10-16-2012
Status:	Pending	Amount:	1 Years - \$35.00
Product Status:	Active	Subscription ID:	-

Manage Listing Type

-  View Public Listing
-  **Edit**
-  Statistics

6) On this page, you can edit all of the public information on your profile.

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Menu

- Account Summary
- View/Edit User Info
- Edit Your Profile
After you click this, select the "edit" icon all the way to the right
- Invoices
- Directory Home
- Logout

Listings

Edit Listing

Title: *

28 / 255

Friendly URL (This is Automatic):

Level of EMDR Training: *

- EMDR Trained Clinician
- EMDRIA Certified Clinician
- EMDR Approved Consultant
- EMDR Assistant Instructor or Facilitator
- EMDR Trainer

Phone:

Fax:

Address Line 1:

Address Line 2:

State: *

- United States
 - Massachusetts
 - New York
 - Connecticut
 - Alabama
 - Alaska
 - Arizona
 - Arkansas
 - California
 - Colorado
 - Delaware
 - Florida
 - Georgia
 - Hawaii
 - Idaho
 - Illinois
 - Indiana
 - Iowa
 - Kansas

City/Town:

Zip Code:

Website:
Example: <http://www.domain.com>

Email:

Logo: No file chosen

Describe your clinical orientation and/or current interests in 75 words or less.

2nd Location Address:

If you have an additional office address, please make note of that here:

Click "Submit" to save your changes. If there are any problems with what you've entered, you'll need to fix it before you save your changes.

Once you click "Submit", your changes are immediately available online.