



Using the space below, place your staff under their AccuShelf level of access. This list can then be emailed out or posted on a bulletin board for them to sign up for their corresponding webinar!

**AccuShelf Mode:** \_\_\_\_\_

**Administrators:**

1. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
2. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
3. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
4. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
5. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
6. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
7. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
8. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

**Loading Clinicians:**

1. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
2. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
3. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
4. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
5. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
6. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
7. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
8. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

**Clinicians:**

1. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
2. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
3. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
4. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
5. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
6. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
7. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_
8. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

**Administrators:**

9. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

10. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

11. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

12. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

13. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

14. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

15. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

16. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

**Loading Clinicians:**

9. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

10. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

11. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

12. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

13. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

14. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

15. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

16. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

**Clinicians:**

9. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

10. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

11. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

12. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

13. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

14. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

15. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

16. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date Completed: \_\_\_\_\_