



How To: Submit a Training Request Through ZenDesk

❖ Use the following link <https://wpoustraining.zendesk.com/>

❖ Already have an existing Account with Zen Desk – **Get a Password**

Email

Password

Stay signed in

Sign in

Your credentials will be sent over a secure connection

Cancel

Forgot my password

New to WPO Customer Portal? [Sign up](#)

Have you emailed us? [Get a password](#)

If you've communicated with our support staff through email previously, you're already registered. You probably don't have a password yet, though.

- A second pop-up box will appear. Enter your email address and watch for a Zendesk email with a password link to activate and set-up your password. That's it!



❖ **Submitting Requests to the New Zen Desk Site without a User Account**

- Click “Submit a Request” and choose the request form needed. Here, you will encounter two new fields:
- Email – use the email address you originally used for previous Zen Desk (the one you receive your request email notifications/updates)
- Captcha Verification – a visual security code required to submit a ticket
- These 2 fields will be required each time you submit a new request. Once complete, you will be able to respond to and manage requests from your email.
- If you would prefer to not have to enter your email and complete the “Captcha” each time you submit a new request you will need to set-up a new password in this new version of Zendesk.



❖ Create a new User Account

- Click sign in (top right corner)
- Click sign up (next to New to WPO Customer Portal?)
- Enter your full name and your email
- Type text in box
- Click sign up
- Close webpage
- Click on link received through email
- Create password
 - Password Requirements:
 - Must be at least 6 characters
 - Must include letters in mixed case numbers
 - Must include a character that is not a letter or number
- Click Set Password button

❖ Click Sign In Button

❖ Homepage has 2 FAQ options (End-User Training Video and End-User Guide)

❖ Click the Submit a Request Link (top right of page)

❖ Please choose appropriate request from below

- Benefit Fair Request
- Content Request
- Training Request Form

❖ Subject

- Company name
- Title of training
- Date of training



❖ **Description**

- You may enter quick details of request or title of training

❖ **Are you the EAP Account Manager?**

- Always select “NO”

❖ **Name of EAP training is offered through**

- Deer Oaks EAP Services

❖ **Name of company requesting training**

- Organization requesting training

❖ **Type of company/industry**

- Government, ISD, etc..

❖ **Street address where training will occur**

❖ **City, State & Post Code where training will occur**

❖ **Are you the primary contact person for the training location?**

- If no, please provide primary contact’s name, title, phone number, and email.

❖ **Security/Parking/Logistics information for training location**

- Please include specific location pertaining to training location

❖ **Equipment available at training location**

- Please advise if computer and projector is available

❖ **Estimated number of participants**

❖ **Title of Training**

❖ **Format of Training**

- On-site Seminar
- Webinar
- EAP Orientation- On-site
- EAP Orientation- Webinar



❖ **Time of Training**

- In hour increments
- If more dates/times needed, please list here
- **All trainings requested are assumed 1-hour in length. Do you need a different length for the training?**
 - If yes, add length of session needed

❖ **Do you have a preferred presenter for this training?**

- If yes, please provide name of preferred presenter

❖ **Do you have a presenter you do NOT want utilized?**

- If yes, please provide name of presenter(s) NOT to be contacted

❖ **Do you need this training in a language other than English?**

- If yes, please provide other language

❖ **Are there any recent events, announcements, situations that would be helpful for the trainer to know about that spurred this request for training?**

- You may add announcements here

❖ **Is there any other information or questions not covered that you would like to share?**

- Please add other information here

❖ **By checking this box, you agree that should this event be cancelled, you will provide at least 2-business days' notice by accessing this request and typing a message in the ticket that it is cancelled.**

- Check small box to continue

❖ **Attachments**

- No need to upload files

❖ **Click Submit Button**

❖ **You will receive an email notification following your submission.**

Should you have any questions pertaining to submitting your request, please contact us at 1-866-327-2400.