



Instructions for Creating and using a Teamup Calendar Account


A. OBTAINING A FREE TEAMUP CALENDAR LINK

1. Submit a valid email address that is not associated with a Teamup calendar to dph.oralhealth@illinois.gov.
2. Place "email for Teamup registration" in the subject line.
3. When your email arrives with your Teamup invitation link, click on the link.

The following images will appear with each click as instructed.

[External] Invitation to calendar Team Calendar on Teamup ↩ ↶ ↷

 Teamup <support@teamup.com> Today at 6:40 PM
To:  Foran, Sherri




You are invited!

Administrator has invited you (Sherri.Foran@illinois.gov) to collaborate on calendar **Team Calendar**.

<https://teamup.com/c/nyydp>

Thank you
support@teamup.com

CLICK ON THE LINK
AND CREATE A
TEAM UP ACCOUNT



Log in to Teamup

EMAIL

PASSWORD


REMEMBER ME

Don't have an account? [Create a Teamup Account](#)

Forgot your password? [Reset it.](#)

CREATE A TEAMUP ACCOUNT BY
CLICKING HERE

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Create a Teamup Account

NAME

EMAIL

LANGUAGE
English (United States) ▼

PASSWORD

REPEAT PASSWORD

Subscribe to our quarterly newsletter and important service announcements.

I accept the [Terms of Service](#) and the [Privacy Policy](#).

Already have an account? [Log In](#)

COMPLETE THE CIRCLED FIELDS

B. CREATING A TEAMUP CALENDAR ACCOUNT

1. Enter required information to create your free Teamup calendar
 - Name of your entity
 - Email
 - Create Password
 - Confirm Password
 - Accept the terms of Service
2. Create New Account

C. USING THE TEAMUP CALENDAR

1. Log in to Teamup with registered email and password
2. Calendar will appear
3. Find the date of a scheduled school visit to be entered into the calendar- double click on the time providers will be arriving or starting the clinic
4. Complete all event fields. **Note: all fields require an entry or information will not be saved.**
 - Name of School and Last name of supervising dentist(s)
 - Address of School
 - School contact name and direct line phone number (if available)
 - Number and credentials of providers (i.e., 2 RDH's, 2 EFDA's, 1 DDS)
 - Number of approximate consent forms and number of days you anticipate your event requiring. (Example: day 2 of 5 or day 1 of 1)
 - **Save your information**
5. If desired, the Teamup Calendar has an iPhone and android app and can be downloaded for free to any smartphone.

D. Editing your Teamup calendar is easy.

- Simply click on the date you wish to edit, change the desired information and click save. Remember: if your changes occur inside of three weeks of your event you must also send an email to dph.oralhealth@illinois.gov.

E. CREATE A TEST TEAMUP CALENDAR ENTRY.

This is to assure all parties that the Teamup calendar is working as expected and any technical issues can be worked out ahead of the beginning of your school visits.

1. Create a test event using the following information:

- Select August 10, 2022
- Uncheck “all day” and choose your time of arrival and departure (approximate, for this case chose 8a-3p)
- ABC Elementary, Dr. Jones
- 1234 Lake Shore Drive, Chicago, IL 60611
- Jan Smith, RN 312-123-1234
- 2 RDH’s, 2 EFDA’s, 1 equipment manager
- Day 2 of 5, 300 consents. (This event field will allow the consultants to know how many days you **anticipate** your visit to take)
- In the comments section add anything that could be helpful: such as parking, where your team is going to be set up, or if testing going on this day and the number of children seen may be low, and so on.
- **Save your information**

2. By creating this “test event” we can view what you have entered and assist if needed to assure a smoother transition to this new calendar process.