



Portal.shieldillinois.com

Portal Creation Instructions

1. Click "Sign up for an account."



2. Enter the Agency Code for your organization

Enter your Agency Code:	
v99k3key-stu	
	OK Cancel

3. Complete your registration and submit.

SHIELD CHIVERSITY OF ILLINOIS SYSTEM										
Online Registration (SHIELD	ill recei	nois Mobi	ile) via text message. Enter the code on this site to com	pleti	e the registration process.					
First Name					Last Name					
Date of Birth (MM/DD/YYY)			Email Address (will become your web account us	ser r	name)	C	Confirm Email Address			
Address City			City			s	State Select State			~
Zip Code (The zip code of your local residence) Mobile Phone #			Mobile Phone #				Sender O Male C	Female	O Other	
Extra Details										
Ethnicity		Race			2nd Race (optional)					
Select Race/Ethnicitv	~	Select Race	~		Select 2nd Race	~				
Consent for SHIELD Illinois Covid Saliva Testing By registering with SHIELD Illinois, I consent to the collection, stora responsible for the accuracy of all information that I enter and repre-	e, and ent tha	use of my personally id t I am over 18 years of a	entifiable information (such as name and date of b ge.	irth,) and my sensitive health information for purpos	ses of	f receiving, processing, an	d making avai	Nable my COVID-19 test results. I understand that I at	m
My results can be shared with Laboratory leadership and SHIELD IL.										
Submit Cancel										





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- 4. You will receive a special code via text and email to confirm your identity.
- 5. Enter that code as indicated.

Image: Shield state Image: Shield state Image: Shield state Image: Shield state Image: Shield state Image: Shield state Image: Shield state
We have sent a registration code to 1111211212 via text message and to jasweet15@yahoo.com via email. This code will expire in five (5) minutes. When you receive the code, please enter it here to continue the registration process. It may take one (1) to two (2) minutes for your code to arrive
Verify Code
Submit Go Back Re-send Code