

Complete a Form Associated with a Required Certification

One of the possible required activities for a certification is to require a form to be submitted or a payment to be made.

User: Frank Delgado

Supervisor: Michael Dupree

My Certifications

Submit Certification

Manage Roles/Certifications

Frank Delgado: Certifications

Print Report

Outstanding Requirements

Search:

Certification	Expiration Date	Attachments	Notes	Activity
Search	Search	Search	Search	Search
Code of Conduct	Nothing on file		Submitted (1/20/2026)	Pending Approval
Confidentiality & Data Privacy Agreement - SEBWND	Nothing on file		--	Complete Form or Payment
Dress Code	History		Submitted (1/20/2026)	Pending Approval
How to Log In - SEBWND	Nothing on file		--	Acknowledge Document / Video
Janitorial Annual CBT	Nothing on file		--	Acknowledge Document / Video
Moodle Course with Instructors	Nothing on file		--	Take Course
W4 Upload	Nothing on file		--	Submit Certification
Window Washing FAQs	Nothing on file		Submitted (1/20/2026)	Pending Approval

Showing 1 to 8 of 8 entries

Complete Form or Payment is a context menu open as well as a button in the Activity column on a user's My Certifications Tab on the My Account Page of the People Module. It is also a clickable link in the Required Activity column on a User's Certifications Page.

Dashboard

Calendar

Accounts

People

My Account

Certifications

Assets

Documents

Grid

Attendance Log

Kanban

Database

Certifications

Filters

Tags

Select Some Options

Set Filter

Clear

Show certifications:

Required for me

With a required activity

Search:

Certification	Duration	URL	Required Activity
CPR (Quick)	1 years		Acknowledge Document / Video
Chemical Propellants and You	3 years		Acknowledge Document / Video
Code of Conduct	1 years		Acknowledge Document / Video
Company Onboarding - SEBWND	3 years		Take Course
Confidentiality & Data Privacy Agreement - SEBWND	6 years		Complete Form or Payment

Select Complete Form or Payment to open the Complete a Form Modal, which displays the required activity directly in the modal.

Frank Delgado Complete a Form for "Confidentiality & Data Privacy Agreement - SEBWN0"

This form is being submitted for Frank Delgado (delgado)

Confidentiality & Data Privacy Agreement

This form is not currently final any submissions may be deleted

Full Name:

Frank Delgado

Date of Birth:

11/21/1980

Badge Number:

SEBWN0-01404008

Hire Date:

6/11/2021

Department *

Human Resources

Job Title *

Manager

I, the undersigned employee, acknowledge and agree that:

1. I understand that all customer and employee information obtained through my work is confidential and must not be disclosed to unauthorized individuals.

2. I will not create, use, or share confidential information except as required for my job responsibilities.

3. I will properly secure and dispose of physical and digital documents containing sensitive information.

4. I understand that sharing my system login credentials or sharing system credentials is a violation of bank policy.

5. I will report any suspected data breach, security incident, or unauthorized access immediately to my supervisor or the IT Security department.

6. I will not remove confidential materials from bank premises without prior written authorization.

7. I understand that confidentiality obligations continue after my employment ends.

8. I acknowledge that violation of this agreement may result in disciplinary action, up to and including termination of employment and possible legal consequences.

9. I certify that I have read and understood the bank's policies on confidentiality, data security, and acceptable use of technology.

10. I agree to comply fully with these policies and any future updates as communicated by the bank.

Acknowledgement/Initials *

FD

Failure to comply with the confidentiality and data privacy policies outlined in this agreement may result in disciplinary action, up to and including termination of employment. In addition, violations may subject the employee to civil liability, criminal prosecution, and personal financial responsibility for any damages caused. The Western Bank of Southwestern North Dakota reserves the right to enforce these policies to the fullest extent permitted by law.

A signature is required from the person currently accessing the form

Sign below:

FDelgado

Please type your name *

Frank Delgado

Save

Date *

2026-01-20

Save Draft Submit Cancel

Any Form associated with a required activity has already been created in the Forms Module and Integrated with the People Module. Forms can be customized so that drafts can both be saved as progress is made and submitted from the modal.

Select "Submit" from the Complete a Form Modal and a modal confirms that the certification's required activity has been met.

trainingground.kastrack.com says

Requirement met. Thank you!

OK

Select "OK" to return to the table you initiated completing the activity in.

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