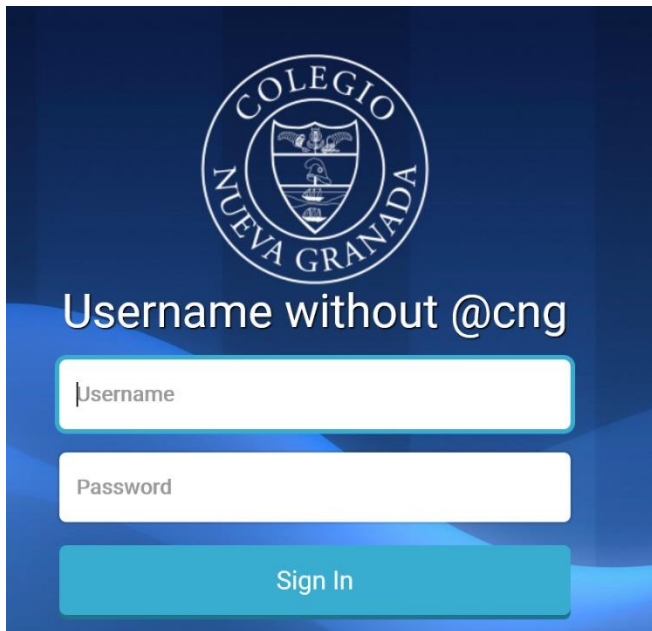


Please log into Skyward to begin the process. Below is a step-by-step guide.

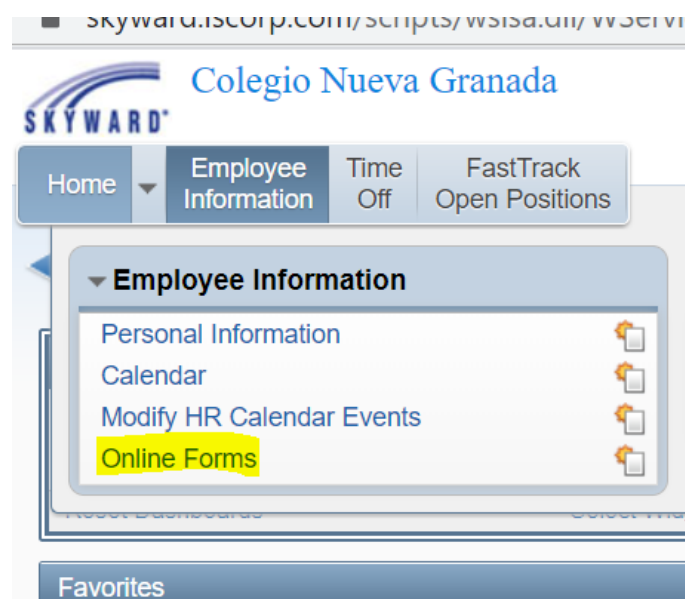
1. Go to sso.cng.edu > Essential Apps > 002. Human Resources Skyward



The login page features the Colegio Nueva Granada logo at the top. Below it, the text "Username without @cng" is displayed. There are two input fields: "Username" and "Password". A "Sign In" button is located at the bottom.



2. Once your login, click in Employee Information > Online Forms



3. Please click on “Survey” (highlighted text) to continue.

Home Employee Information Time Off FastTrack Open Positions

Employee Online Forms

New

Survey due by 07/30/2020

In Progress
There are no In Progress online forms to be completed

Completed
There are no Completed online forms.

History
There are no History online forms.

4. The next screen is the UPDATE - Data Protection. Click on this link for Data Protection* > Read > Authorize > Save. > I have completed this step.

Employee Online Forms

1. Data Protection*

Thank you for filling out the data protection step.

[Click on this link for Data Protection*](#)

[I have completed this step.](#)

Survey Prueba

1. Data Protection*
2. Individual risk survey / Encuesta de riesgo individual
3. Complete Online Form

Data Protection*

Name: Employee Type: Local Hired Building Code: ADM

[Save](#)
[Save and Print](#)
[Back](#)

Data Protection

[SEE AUTHORIZATION DOCUMENT HERE / VER AUTORIZACION EN ESPANOL](#)

After reading and understanding this AUTHORIZATION of personal data treatment, I AUTHORIZE the treatment of my personal data, as well as the transmission or transference of required data, as long as there is a contract with CNG, plus the time that CNG must maintain data to comply with the law, quality or historical support.

CORPORACION COLEGIO NUEVA GRANADA -CNG- respects personal data in accordance with the requirements of Law 1581 of 2012 and its regulatory decree 1074 of 2015. We collect your personal data in this form in order to comply with the guidelines established by the National and Local Government, for the prevention of COVID-19, strengthening of HQSE - Health, Quality, Safety and Environment - and economic reactivation. Access to information will be restricted to a special Committee of the CNG and to the entities indicated by the Law.

If you have questions about the use of your data, write an email to SGSST@CNG.EDU and PROTECCIONDEDATOS@CNG.EDU with the subject: Consultation on Health Form. By completing this form you accept the handling of your personal data by CNG for the purposes mentioned here. You can consult our Data Protection Policy available at www.cng.edu

En la CORPORACION COLEGIO NUEVA GRANADA -CNG- respetamos los datos personales acorde a las exigencias de la Ley 1581 de 2012 y su decreto reglamentario 1074 de 2015. Recaudamos sus datos personales en este formulario con la finalidad de cumplir los lineamientos establecidos por el Gobierno Nacional y la Alcaldía de Bogotá para la prevención del COVID-19, fortalecimiento de Seguridad y Salud en el Trabajo (SST) y reactivación económica. El acceso a la información estará restringido Por profesionales de la salud del CNG y a los entes que indique la Ley.

Si tiene consultas sobre el uso dado a sus datos escriba un email a SGSST@CNG.EDU y a PROTECCIONDEDATOS@CNG.EDU con el asunto: Consulta sobre Formulario Salud. Al diligenciar este formulario usted acepta el manejo de sus datos personales por parte de CNG para las finalidades aquí mencionadas. Puede consultar nuestra Política de Protección de Datos disponible en www.cng.edu

I authorize the treatment of my personal data. / Autorizo el tratamiento de mis datos personales

I AUTHORIZE ☐

DATE:

MM / DD / VVVV

5. Click on this link for Individual risk survey / Encuesta de riesgo individual > Complete the survey > Save > **I have completed this step.**

Employee Online Forms

2. Individual risk survey / Encuesta de riesgo individual

This form is CONFIDENTIAL. By filling it out you help us protect the health and well-being of our community. Este formulario es CONFIDENTIAL. Al diligenciarlo usted nos ayuda a proteger la salud y el bienestar de nuestra comunidad.

[Click on this link for Individual risk survey / Encuesta de riesgo individual](#)

☐ I have completed this step.

Survey Prueba

1. Data Protection*
2. Individual risk survey / Encuesta de riesgo individual
3. Complete Online Form

Name: Employee Type: Local Hired Building Code: ADM

CONFIDENTIALLY MANAGING THE HEALTH OF OUR COMMUNITY
MANEJANDO CONFIDENTIALMENTE LA SALUD DE NUESTRA COMUNIDAD

This form is CONFIDENTIAL. By filling it out you help us protect the health and well-being of our community.
Este formulario es CONFIDENTIAL. Al diligenciarlo usted nos ayuda a proteger la salud y el bienestar de nuestra comunidad.

CORPORACION COLEGIO NUEVA GRANADA -CNG- respects personal data in accordance with the requirements of Law 1581 of 2012 and its regulatory decree 1074 of 2015. We collect your personal data in this form in order to comply with the guidelines established by the National and Local Government, for the prevention of COVID-19, strengthening of HQSE - Health, Quality, Safety and Environment - and economic reactivation. Access to information will be restricted to a special Committee of the CNG and to the entities indicated by the Law.
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Si tiene consultas sobre el uso dado a sus datos escriba un email a SGSST@CNG.EDU y a PROTECCIONDEDATOS@CNG.EDU con el asunto: Consulta sobre Formulario Salud. Al diligenciar este formulario usted acepta el manejo de sus datos personales por parte de CNG para las finalidades aquí mencionadas. Puede consultar nuestra Política de Protección de Datos disponible en www.cng.edu

GENERAL INFORMATION

INFORMACIÓN GENERAL

NAME
NOMBRE:

Type of Identification
Tipo de Identificación: Cedula de Ciudadania

Gender
Género:

ID Number
Número de Identificación:

Age
Edad:

Area
Area: ADM

Where in Bogotá are you located
En que localidad do reside?

Si usted vive en otro municipio, por favor marque en cuál.

Save
Save and Print
Back

6. Click I have completed this form > Close and Finish

3. Complete Online Form

When you have completed this online form, check the I have completed this online form.

Step	Status	Last Accessed	Completed by
1. Data Protection*	Completed	07/30/2020 10:59 AM	
2. Individual risk survey / Encuesta de riesgo individual	Completed	07/30/2020 11:05 AM	

☐ I have completed this online form.**Survey Prueba**

1. ✓ Data Protection*
2. ✓ Individual risk survey / Encuesta de riesgo individual
3. Complete Online Form

Step 3 of 3

[Previous](#)[Finish](#)[Close and Finish Later](#)