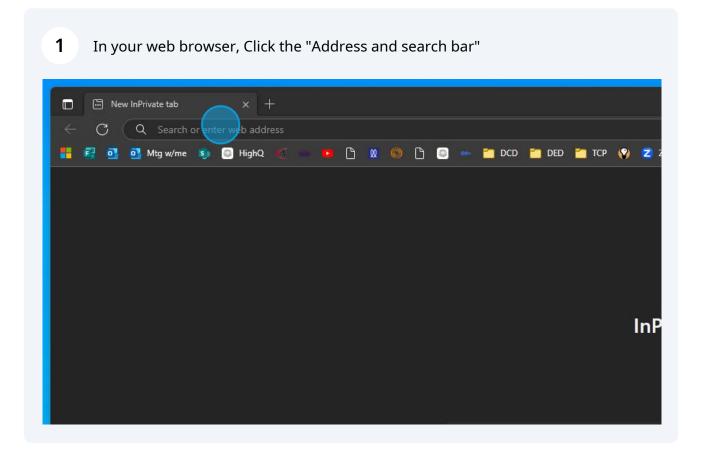
# How to Submit a Request for Services (the Blue Sheet) to NNDOJ

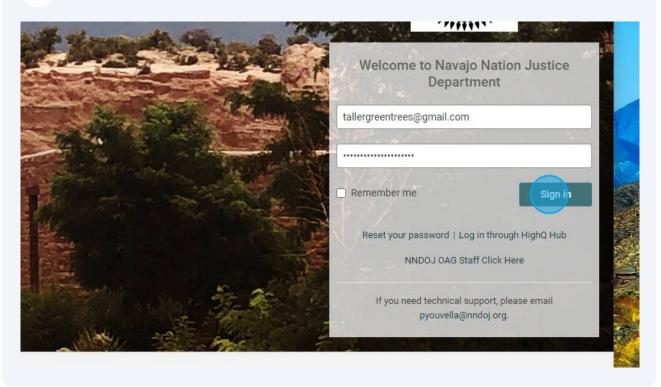
This guide provides step-by-step instructions on how to submit a Request for Services (the blue sheet) using the NNDOJ online system, HighQ. By following these instructions, users will be able to efficiently navigate the online system to submit their request, ensuring that it is properly processed and addressed.

Please email highqhelpdesk@nndoj.org with any questions.



#### 2 Type:<u>https://nndoj.highq.com/</u>

**3** Enter your login credentials and Click "Sign in"

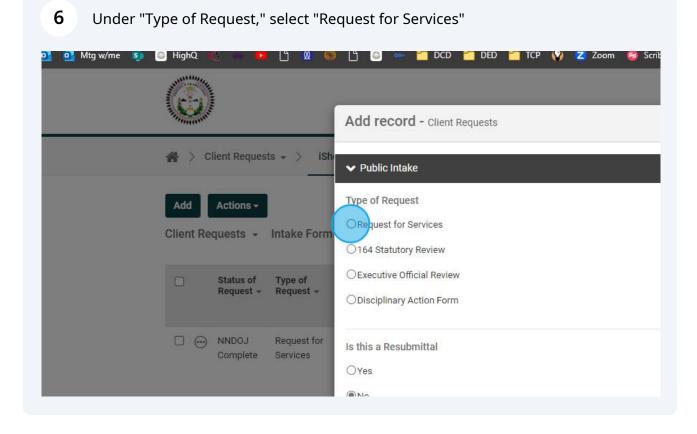


#### 4 Click "Intake Forms" at the top middle of the page

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|                 |        |        |        |         |     |       |      |          |           |        |   |                    |  |
| 15 <del>-</del> | Intake | Form ( | Public | View)   | •   |       |      |          |           |        |   |                    |  |

#### 5 Click "NNDOJ Intake Form" in the drop-down menu

| heetHo                     | me.action?met        | aData.helpID=0&r       | metaData.site | elD=9&metaDa   | ta.parentFolderID                       | =67&metaData.sh               | eetld=7           |             |
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| S 🔻                        | Intake Form          | (Public View) -        |               |                |   |                               |                   |             |
|                            |                      |                        |               |                |   |                               |                   |             |
|                            |                      |                        | Document      | Doc. No. Issue | Document Type                           | <ul> <li>Is this a</li> </ul> | Past              |             |
|                            | Type of<br>Request - | NNDOJ<br>Tracking No + | No            | Date -         | • | Resubmi                       |                   | Description |
|                            | Type of<br>Request + | NNDOJ<br>Tracking No 👻 | No. +         | Date +         |   |                               |                   | Description |
| is of<br>iest <del>-</del> |                      |                        | No. +         | Date 👻         |   |                               | ttal - Submission | Description |



7 If you are resubmitting something to NNDOJ, change "Is this a Resubmittal" to "Yes"

| Add<br>Client Re | Actions <del>-</del><br>quests -  | Intake Form             | Type of Request  Request for Services  O164 Statutory Review    |
|------------------|-----------------------------------|-------------------------|---|
|                  | Status of<br>Request <del>+</del> | Type of<br>Request +    | OExecutive Official Review                                      |
|                  | NNDOJ<br>Complete                 | Request for<br>Services | Is this a Resubmittal<br>OYes<br>No                             |
| -                |                                   |                         | Is this an Employment-related Question (required)<br>OYes<br>No |
|                  |                                   |                         | Description of Request (required)                               |

In the new "Past Submission No(s)." box, enter all former identifying RFS or document numbers related to this matter.

|   | NNDOJ<br>Complete | Request for<br>Services | Is this a Resubmittal<br>res<br>No  |
|---|-------------------|-------------------------|---|
| • |                   |                         | Past Submission No(s). (required) Please provide all Request for Service or Document Review Request numbers related to this math  Is this an Employment-related Question (required)  Yes  No  Description of Request (required) Briefly describe your request |

8

For example, here the submitter typed the former number as "23-1547" for a past Request for Service.

|  |  |                                  | Q ↓ ☑ ☆ ▲        |
|--|--|----------------------------------|------------------|
| New York                                       | Add record - Client Requests   | Jump to 👻 🗶                      |                  |
| 🚓 > Client Requests 🗸 👌 iSh                    | ⊛Yes   | '                                |                  |
| _  | ONo  |                                  |                  |
| Add Actions -<br>Client Requests - Intake Form | Past Submission No(s). (required)<br>Please provide all Request for Service or Document Review Request numbers related to this matter. |                                  | search ←         |
| Status of Type of<br>Request + Request +       | 23-1547  |                                  | ne – Last Name – |
| MNDOJ Request for     Complete Services        | is this an Employment-related Question (required)<br>OYes<br>®No   |                                  | The Elephant     |
|  | Description of Request (required)<br>Briefly describe your request   |                                  |                  |
|  | Name of Division/Program (required)<br>Select your department<br>- Select from below -   | •                                |                  |
|  | First Name   |                                  |                  |
|  | Last Name  | Auto-saved at 13:40 Cancel Add - |                  |
|  | Onde alticular i record     O 2023. Thomson Recters: I Thomson Recters Riviews Statement   Terms of User i M                           |                                  |                  |

Click "Description of Request" and type a brief title and background for your submission 10

|        |                     |                         | Is this an Employment-related Question (required)                  |
|--------|---------------------|-------------------------|--|
|        | ) NNDOJ<br>Complete | Request for<br>Services | ⊖Yes<br>⊛No  |
|        |                     |                         | Description of Request (required)<br>Briefly describe your request |
| 4 0000 |                     | _                       |  |
|        |                     |                         | Name of Division/Program (required)                                |
|        |                     |                         | Select your department - Select from below                         |
|        |                     |                         | First Name   |
|        |                     |                         |  |

9

### **11** Select the name of your Division/Program from the "Name of Division/Program" drop-down menu

| 🗌 🌧 NNDOJ Re | legal review of business site lease proposed language                                    |
|--------------|--|
|              | Name of Division/Program (required) Select your department                               |
|              | Select from below  |
|              | - Select from below -<br>Division of Community Development<br>Division of Dine Education |
|              | Division of Economic Development<br>Division of General Services                         |
|              | Division of Health<br>Division of Human Resources  |
|              | Division of Natural Resources  |
|              | Division of Public Safety<br>Division of Retirement Services                             |
|              | Division of Social Services<br>Division of Transportation                                |
|              | Navajo Environmental Protection Agency   |
|              | Navajo Election Administration<br>NN Chapters  |
|              | NN Caming Degulatory Office  |

## 12 Under the new option with your Division name, select the appropriate Department.

|      | ) | NNDOJ    | Request for | legal review of business site lease proposed language |
|------|---|----------|-------------|---|
|      | ÿ | Complete | Services    | Name of Division/Program (required)                   |
|      |   |          | _           | Select your department                                |
|      |   |          |             | Division of Economic Development                      |
| < 60 | - | _        | _           | Division of Economic Development (required)           |
|      |   |          |             | Select from below                                     |
|      |   |          |             | First Name  |
|      |   |          |             |   |
|      |   |          |             | Last Name   |
|      |   |          |             |   |
|      |   |          |             |   |

**13** For example, here the submitter selects the Ft. Defiance Regional Business Development Office after selecting the Division of Economic Development

|   | Division of Economic Development  |
|---|---|
| • | Division of Economic Development (required)   |
|   | Select from below   |
|   | - Select from below -   |
|   | Administration  |
|   | Business Regulatory Department  |
|   | Chinle Regional Business Development Office   |
|   | Eastern Regional Business Development Office  |
|   | Ft. Defiance Regional Business Development Office<br>Project Development Department |
|   | Real Estate Department  |
|   | Shiprock Regional Business Development Office                                       |
|   | Small Business Development Department   |
|   | Support Services Department   |
|   | Tourism Department  |
|   | Western Regional Business Development Office  |
|   |   |
|   | Add another record  |
|   |   |
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|   |   |

#### **14** Enter the first and last name of the person with the legal request

| Select your department                            |
|---|
| Division of Economic Development                  |
| <br>Division of Economic Development (required)   |
| Ft. Defiance Regional Business Development Office |
| First Name  |
| Last Name   |
|   |
| E-mail Address                                    |
| Add another record                                |
| 0 000 TL  |

#### **15** Enter the e-mail of the person with the legal request

NOTE -- this email does not have to be the same email used for the account login. It can be the email directly to the person with the legal request

| Complete Services | First Name  |
|-------------------|---|
|                   | Henrietta   |
|                   | Last Name Whoville  |
|                   |   |
|                   | E-mail Address  |
|                   | Phone Number  |
|                   |   |
|                   | Suggested Deadline  |
|                   | Provide an appropriate deadline for NNDOJ's review of your submission. Your selection of a deadline does r<br>grant completion by your selected date. |
|                   | Add another record  |

#### **16** Enter the phone number of the person with the legal request

|                     |                         | Last Name   |
|---------------------|-------------------------|---|
| ) NNDOJ<br>Complete | Request for<br>Services | Whoville  |
|                     |                         | E-mail Address  |
|                     |                         | highqhelpdesk@nndoj.org   |
|                     |                         | Phone Number  |
|                     |                         | Suggested Deadline  |
|                     |                         | Provide an appropriate deadline for NNDOJ's review of your submission. Your selection of a deadline does not<br>grant completion by your selected date. |
|                     |                         | (MM/DD/YYYY)  |
|                     |                         | Reason for Deadline   |

#### **17** If necessary, you may select a suggest deadline for the request for legal service

|                         | Phone Number  |
|-------------------------|---|
| Request for<br>Services | 111-222-3333  |
|                         | Suggested Deadline  |
|                         | Provide an appropriate deadline for NNDOJ's review of your submission. Your selection of a deadline does not automatically heighter grant completion by your selected date. |
|                         | Reason for Deadline   |
|                         | Supporting Documents<br>Attach all documents related to your request.<br>Browse or drag files to upload   |
|                         | 1   |

#### **18** If a suggested deadline is picked, provide a reasoning for its selection

| $\smile$ | vices     | 22-3333  |              |  |                       |
|----------|-----------|--|--------------|--|-----------------------|
|          | Provide   | st <b>ed Deadline</b><br>an appropriate deadline for NNDO<br>mpletion by your selected date. | J's review o | v of your submission. Your selection of a deadline o | loes not automaticall |
|          | 09/08     | /2023  |              | (MM/DD/YYYY)   |                       |
|          | Reason    | a for Deadline   |              |  |                       |
|          | 10 B 11 P | ting Documents<br>II documents related to your reque   | est.         |  |                       |
|          | Brows     | or drag files to upload  |              |  |                       |
|          | > Doc     | ument Review   |              |  |                       |

**19** For example, here the submitter noted: "My client would like to present to its Board of Director's at it's next meeting" as the reason for the deadline selection

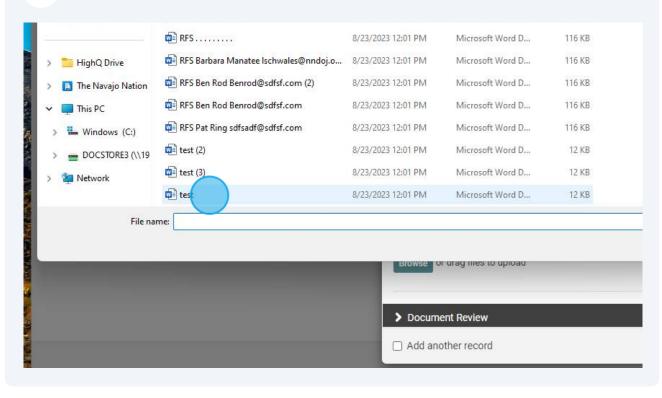
| <b>W</b>                                 | Add record - Client Requests  | Jump to 👻 🗶  |                 |
|--|---|--|-----------------|
| 🚜 > Client Requests 🗸 > iSh              |   | A  |                 |
|  | Last Name   |  |                 |
| Add Actions -                            | Whoville  |  | search -        |
| Client Requests + Intake Form            | E-mail Address  |  | ₽ ☆             |
| Status of Type of<br>Request - Request - | highqhelpdesk@nndoj.org   |  | e + Last Name + |
|  | Phone Number  |  |                 |
| MNDOJ Request for     Complete Services  | 111-222-3333  |  | The Elephant    |
|  | Suggested Deadline  |  |                 |
|  | Provide an appropriate deadline for NNDOJ's review of your submission. Your selection of a deadline does not<br>grant completion by your selected date. | automatically neighten the submissions priority or |                 |
| -  | 09/08/2023 🛗 (MM/DD/YYYY)   | 1  | •               |
|  | Reason for Deadline   |  |                 |
|  | My client would like to present to its Board of Director's at it's next meetin  |  |                 |
|  | Supporting Documents  |  |                 |
|  | Attach all documents related to your request.   |  |                 |
|  | Browse or drag files to upload  |  |                 |
|  | > Document Review   |  |                 |
|  | Add another record  | Auto-saved at 13:42 Cancel Add -                   |                 |
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|  |   |  |                 |

**20** Attach all supporting documentation for the legal request by clicking "Browse"

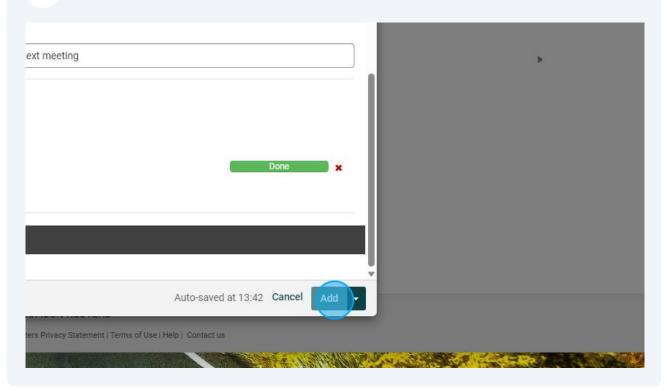
As much information as you are able to provide is always beneficial.

|   | grant completion by your selected date.  |             |                                     |
|---|--|-------------|-------------------------------------|
| 4 | 09/08/2023   |             | (MM/DD/YYYY)                        |
|   | Reason for Deadline  |             |                                     |
|   | My client would like to present to   | its Board o | f Director's at it's next meetir    |
|   | Supporting Documents   |             |                                     |
|   | Attach all documents related to your required by the second secon | Jest.       |                                     |
|   | > Document Review  |             |                                     |
|   | Add another record   |             | W2027                               |
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| 22 Click     | k "Open" Repeat as necessary to attach all files   |
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| soft Word D  | 116 KB   |
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#### 23 Once all files are attached, Click "Add" to send your Request for Services to NNDOJ