

Law Enforcement

Connecticut Justice Information Systems Support Group

CUAR

CJIS User Authorization
CJIS -1 Rev 06-02

101 East River Drive, East Hartford CT 06108-3274

Telephone 860.622.2000 Fax 860.610.0749

This form must be Approved and Submitted by the CJIS User's Manager.

**For OBTS access, Approval of the
Agency/Branch CJIS Authorizing Individual is Required
Please Print All Information Clearly**

| CJIS Support Group Use Only |
|--------------------------------|
| PROCESSED BY |
| DATE |
| USER ID AFFECTED |

CJIS USER IDENTIFICATION

| | |
|---|---|
| Person for <u>Whom</u> Access is Requested (<i>Given First Name, Last Name</i>) | Name of Branch MUN |
| e-mail | Town |
| Phone Number | Department LAW ENFORCEMENT |
| Fax Number | Department Address (<i>Street, City, Zip</i>) |

TYPE OF REQUEST

| | | | |
|---|--|--|---|
| <input checked="" type="checkbox"/> ⁽¹⁾ Check if this is User's First Request for Access to a CJIS Application | <input checked="" type="checkbox"/> New Access to CJIS Application | <input type="checkbox"/> Modify Access to CJIS Application | <input type="checkbox"/> Terminate Access to CJIS Application |
|---|--|--|---|

| |
|--|
| CURRENT CJIS USER ID (<i>Provide Only if Box 1 is Not Checked</i>) |
|--|

APPLICATION

| | | | |
|---|-----------------------------|--|---|
| <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | OBTS CERTIFICATION TRAINING Requested | Requested Training Dates and Times (<i>Enter 3 Dates/Times from Training Schedule, in Preferred Order</i>) 1 st Choice _____ 2 nd Choice _____ 3 rd Choice _____ |
| | | | Requested Training Location (<i>Enter Training Location for Each Date/Time Choice</i>) Location for 1 st Choice _____ Location for 2 nd Choice _____ Location for 3 rd Choice _____ |

| | | |
|---|-----------------------------|--|
| <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | OBTS ACCESS (<i>Signed OBTS Certification Form Obtained at Training is Required for OBTS Access.</i>) |
|---|-----------------------------|--|

| |
|--|
| NEW OBTS CJIS APPLICATION ROLE (Not Applicable for Termination of Access Request) <i>(See Following Page for CJIS Application Roles and Definitions)</i> |
|--|

| |
|---|
| CURRENT OBTS CJIS APPLICATION ROLE (Not Applicable for First Access Requests (1) or for New Access Requests) <i>(See Following Page for CJIS Application Roles and Definitions)</i> |
|---|

MANAGER'S APPROVAL (*Required Section*)

| | |
|--|---|
| Name of Person Approving the Requested Access (<i>Last Name, First Name</i>) | Name of Branch MUN |
| Signature | Town |
| e-Mail | Department LAW ENFORCEMENT |
| Phone Number / Fax Number | Department Address (<i>Street, City, Zip</i>) |

Agency TAC OFFICER'S APPROVAL (*Agency MUST Provide Signature Below Before CUAR Will be Processed*)

| | |
|---|---|
| Agency / Branch CJIS Authorizing Individual (<i>Agency TAC Officer</i>) (<i>Print Name</i>) | Agency / Branch CJIS Authorizing Individual's (<i>Agency TAC Officer</i>) Signature |
| AGENCY MUST SIGN IN THIS SECTION | Date |

CJIS APPLICATION ROLES AND DEFINITIONS

| Branch | Agency | Department | CJIS Role | OBTS Case Types | | | | | | | |
|--------|--------|-----------------|--------------------------|-----------------|--------|--------|--------|--------|--------|---------|---------|
| | | | | Cat. 1 | Cat. 5 | Cat. 6 | Cat. 7 | Cat. 8 | Cat. 9 | Cat. 10 | Cat. 11 |
| MUN | (Town) | Law Enforcement | Dispatcher | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes |
| MUN | (Town) | Law Enforcement | Police Officer/Detective | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes |
| MUN | (Town) | Law Enforcement | Records Clerk | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes |
| MUN | (Town) | Law Enforcement | TAC Officer/ ASO | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes |
| MUN | (Town) | Law Enforcement | Chief | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes |
| MUN | (Town) | Law Enforcement | Password Officer | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes |

OBTS Case Types

| | | |
|--------------|--|-------------------------------------|
| Cat 1 | Cases with continuances more than 13 months old | |
| Cat 2 | Erased Case Information | |
| Cat 3 | Erased Youthful offender case Information | |
| Cat 4 | Pardoned Case Information | |
| Cat 5 | Post-finding Alcohol Education or Drug Education Sealed Case Information | |
| Cat 6 | Post-finding case information awaiting erasure | |
| Cat 7 | Post-finding case conviction information | |
| Cat 8 | Sealed juvenile transfer | Not available to any PD user |
| Cat 9 | Pre-finding case information | |
| Cat 10 | Pre-finding Alcohol Education or Drug Education sealed case information | |
| Cat 11 | Pre-finding Youthful Offender sealed case information | |
| Cat 12 | Offender Adjudged a youthful offender, case pending erasure | |

- (1) Agency is not allowed to view these cases unless they are providing services to this individual for this case
- (2) DoC is allowed to view these cases if they are providing services to this individual for this case