



*NCAttrak*

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Application  
Form



NATIONAL  
CHILDREN'S  
ALLIANCE

**OJJDP**

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Please complete and return if you are interested in NCAtrak

Name of program \_\_\_\_\_ City/State \_\_\_\_\_

Contact person \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

***Please indicate so we are better able to plan for your needs:***

1. Describe your current mode of case tracking

- Customized computerized system (name)  
\_\_\_\_\_
- Access Database
- Paper
- Other (please describe) \_\_\_\_\_

2. How urgent are you to access NCAtrak? Please describe.

- Somewhat urgent (within next couple of years) \_\_\_\_\_
- Urgent (by end of year) \_\_\_\_\_
- Desperate (ASAP our system no longer works for us) \_\_\_\_\_  
\_\_\_\_\_
- Yesterday (We are unable to track cases at this time because of system failure) \_\_\_\_\_  
\_\_\_\_\_



- 3. Will you be able to meet the system requirements for NCAtrak?
  - Yes, we currently have all requirements listed
  - Yes, we have funds/access to those requirements listed that we do not currently have in use.
  - No, we will need to secure a plan to meet the needs.
  
- 4. Will you have data to migrate?
  - Yes. Please describe format of existing data, approximate number of cases to migrate \_\_\_\_\_
  - No
  - Not sure (please describe) \_\_\_\_\_
  
- 5. Please identify the number of new cases you see annually \_\_\_\_\_/year
  
- 6. How many counties/jurisdictions do you serve? \_\_\_\_\_
  
- 7. Do you serve multi-teams?
  - Yes. Please indicate number of teams \_\_\_\_\_
  - No
  - I have no idea what this question means so, I am not sure.
  
- 8. Other information you would like us to know \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Completed forms should be sent by mail or email to:

Troy Price, Training and Application Specialist

National Children's Alliance

[tprice@nca-online.org](mailto:tprice@nca-online.org)