|  |  |
| --- | --- |
| **Field****Number** | **Field Name** |
| 1 | Situation Identifier (FY of the Incident YYYY and Service Unique Identifier NNNN) |
| 2 | FAP Unit Identification Code (UIC) (The FAP that received the referral) |
| 3 | US State Alpha Code |
| 4 | Country Code |
| 5 | Incident Report Date (YYYYMMDD) |
| 6 | Military Service Organization Code (Army, Navy, Marine Corps, or Air Force) |
| 7 | Organization Name Text (Defense Logistics Agency or National Security Agency) |
| 8 | Victim Type Code (Child or Adult) |
| 9 | Alleged Abuse Code (Type of Alleged Abuse) |
| 10 | Person Status Code (Is the Victim Alive or Deceased) |
| 11 | Victim Previously Known to the DoD Central Registry (Y/N, only applies to deceased victims) |
| 12 | Alleged Offender Previously Known to the DoD Central Registry (Y/N, same as above) |
| 13 | Situation Incident Findings Date (Date incident determination was made) |
| 13-B | Alleged Abuser Previously Known to the Submitting Service Central Registry (Y/N) |
| 13-C | Incident Did Not Meet Criteria for Abuse (Y/N) |
| 13-D | Incident Did Not Meet Criteria for Abuse But Referred for Services (Y/N) |
| 13-E | Incident Met Criteria for Abuse (Y/N) |
| 13-F | Incident Met Criteria – Date Transferred In from another location |
| 13-G | Incident Met Criteria – Date the incident transferred out to another location |
| 14 | Person Association Reason Code (Relationship of the Victim to the Alleged Offender |
| 15 | Extrafamilial Caregiver Type Code (Type of Extra-familial Caregiver) |
| \*\*\*\*\* | Data in Fields 16 and on are collected only on “Met Criteria” incidents  |
| 16 | Sponsor Person Name Text |
| 17 | Sponsor Person Identifier (SSN, ITIN, FIN, TIN) |
| 18 | Personnel Resource Type Code (Sponsor is civilian, Service Member, Civilian, Contractor |
| 19 | Uniformed Service Organization Code (Branch of Service if the sponsor is a Service Member) |
| 20 | Military Service Organization Component Type Code (Regular, Guard, Reserve) |
| 21 | Pay Plan Code (Enlisted, Officer, GS, GM, ES, or NF) |
| 22 | Pay Plan Grade Ordinal Identifier (Two digit numerical code designating pay grade) |
| 23 | Person-Situation Role Code (Sponsor is victim, alleged abuser, or neither) |
| 24 | Victim Person Name Text |
| 25 | Victim Person Identifier (SSN, TIN, FIN or ITIN) |
| 26 | Victim Person Birth Date |
| 27 | Sex Category Code |
| 28 | Personnel Resource Type Code (Family member, Service Member, Civilian , Contractor, etc) |
| 29 | Substance Involvement |
| 30 | Severity Codes (Mild, moderate, severe by type of abuse) |
| 31 | At Case Closure, Clinical Intervention Provided by: |
| 32 | Alleged Offender Person Name Text |
| 33 | Alleged Offender Person Identifier (SSN, TIN, ITIN, FIN) |
| 34 | Alleged Offender Person Birth Date |
| 35 | Alleged Offender Sex Category Code |
| 36 | Personnel Resource Type Code (Family Member, Service Member, Civilian, Contractor, etc) |
| 37 | Military Service Organizational Code (If Service Member, Branch of Service) |
| 38 | Military Service Organizational Component Type Code (Regular, Guard, Reserve) |
| 39 | Pay Plan Code (Enlisted, officer, civilian pay plan) |
| **Field Number** | **Field Name****Page 2** |
| 40 | Pay Plan Grade Ordinal Identifier (military rank or civilian pay grade) |
| 41 | Blank |
| 42 | Blank |
| 43 | Substance Involvement |
| 44 | At Case Closure Clinical Intervention Provided By |
| 45 | Blank |
| 46 | Blank |