

**Request for Document Integration from Agency to
District Court (MNCIS)**

**(Agency is sending the document to the Courts)**

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**Disclaimer:** This form is only a request for a future document integration and does not guarantee that the integration for this document will be created.

| **Agency Information\*** |
| --- |
| **Today’s Date:** Click here to enter a date. | **Contact Name:**       |
| **Agency Name:**       | **Position/Title:**       |
| **Agency Type:** Choose an item.If Other:       | **Phone:**       |
| **Mailing Address:**                      | **Email:**       |
| **Document Name:**       |

**\*Important:** This request must be submitted by someone with authority to commit your agency to this work.

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| **Integration Information** |
| --- |
|  | Does your agency have a system that can send documents?  | [ ] Yes [ ]  No |
|  | Does your system currently exchange any documents electronically with any other agencies’ systems? *Note: This exchange does not include email or eFS.* | [ ]  Yes [ ]  No |
|  | How will this document integration benefit your agency and/or the court?  |       |
|  | Is your system used statewide?  | [ ]  Yes [ ]  NoIf No, what is the number of counties and/or state agencies that use your system?       |
|  | What is the weekly total number of documents expected to be sent via this document integration?  |       |
|  | How will this document integration improve your agency’s service to the public?  |       |
|  | If this document requires a signature, is your system currently able to create or manage electronic signatures? | [ ]  Yes [ ]  No [ ]  Signature N/A |
|  | To what extent does this document integration create or increase efficiencies for your agency? |       |
|  | Is the document form standardized within your agency?  | [ ]  Yes [ ]  No [ ]  OtherIf Other, please explain.       |

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**How to Submit this Form:**

1. Complete and save this form as a PDF to your computer.
2. Prepare an email with the Subject of “Request for document integration”, and include these two items:

	1. This completed form attached as a PDF file.

	AND
	2. One of the following:

		1. A blank sample of the requested document attached.

OR

* + 1. A MNCIS Case Number and Filing Date for the requested document (if you are unable
		to procure a blank sample).
1. Send the email to ITDServiceDesk@courts.state.mn.us. Your request will be reviewed.