

# Web Submission of Investigation Reports (WSIR) Quick Reference

This *Quick Reference* summarizes how to complete the WSIR web form. The sections are shown in the order you will see them when you log in to the WSIR web form. Required and optional fields are listed for each section. In this reference, the **highlighted** fields in the images show examples of how to complete the required fields (the fields are not highlighted in the actual WSIR web form). The WSIR web form cannot be submitted until all required fields are completed. If any required information is missing, the web form will display a message to identify the fields that must be updated.

## Notes on Using the WSIR Web Form

- You do not have to complete the web form at one time. Click the **Log Out and Submit Later** or **Log out from this Case** buttons to save your data and log out of the WSIR. When you log in again, the web form will contain the information you previously entered.
- Required fields are identified by an asterisk (\*).
- When you enter information in a row, the column headings *above* the required fields will be highlighted in yellow in the web form.
- The WSIR web form provides help for each section. To access this information, click on the  icon, the **(what's this?)** link, or the **Help?** button.
- To enhance your user experience, use Google Chrome™ or Microsoft® Internet Explorer® 9 as your internet browser.
- If you do not already have an NY.gov ID, go to <https://my.ny.gov>

## Sign in to My NY.gov Online Services

- Required \*  Username  
 Password



## WSIR Welcome Screen

- Required \*  Your Full Name  
 Phone Number  
 Email Address  
 State Oversight Agency  
 IRMA Master Incident # / NIMRS ID #  
 VPCR Incident Serial Number  
 VPCR Case Serial Number

## Section 1: Case Summary

- Required \*  County of Incident
- Optional  Law Enforcement Involvement Comments  
 Recommended Corrective or Preventative Actions



## Section 2: Contacts

- Required**  Victim  
 \*  Suspect  
 Investigator  
 Director or CEO/President  
 Personal Representative
- Optional**  Witness  
 Other

Role of Contact	First Name	Last Name	Mailing Address	Date of Birth	SSN	Home Phone Number	Work Phone Number	Cell Phone Number	Email Address	Personal Representative	Self-Advocate
Director	Daria	Director	161 Delaware Ave								
Investigator	Irene	Investigator					(555) 555-5555		investigator@provider.com		
Personal Representative	Rory	Representative	161 Delaware Ave								
Suspect	Stephen	Suspect	161 Delaware Ave	5/10/1987	XXX-XX-6789						
Victim	Unknown	Unknown									
Victim	Veronica	Victim	161 Delaware Ave							Representative	
Victim	Victoria	Victim	161 Delaware Ave								<input checked="" type="checkbox"/>

- Notes**
- When you add a Contact, the column headings *above* the fields that must be completed for that Role are highlighted in yellow.
  - If you identify a Victim as being a **Self-Advocate**, you do not have to add a Personal Representative.
  - If you specify "Unknown" (case sensitive) in the **First Name** and **Last Name** fields for a Victim or Suspect, no additional information required.

## Section 3: Offenses

- Required**  You must add at least one offense  
 \*  Description  
 Victim Last Name  
 Suspect Last Name
- Optional**  Date Offense Occurred

Description	Date Offense Occurred	Victim Last Name	Victim First Name	Suspect Last Name	Suspect First Name
Suspect hit another Victim in the cafeteria	12/1/2014 12:00:00 AM	Victim	Victoria	Suspect	Stephen
Suspect hit Victims in the cafeteria	12/1/2014 12:00:00 AM	Victim	Veronica	Suspect	Stephen

## Section 4: Attachments

- Required**  You must attach a Final Report file  
 \*  File Name  
 Type (Final Report)
- Optional**  Comments  
 Type (Any other value)
- Note** You may also attach other types of files, if appropriate.

File Name	Type	File Type	Comments
final_report	Final Report	docx	Final report about the investigation
my_notes	Interview Notes	docx	Notes made while speaking with various Contacts

## Section 5: Review & Submit

- Required**  Review the information you entered in the web form  
 \*  Read the confirmation statement  
 Click on the check box  
 Click Submit  
 Review the *Successful WSIR submission of investigation report* email sent to the Email Address entered in the WSIR Welcome Screen

I recognize that once this form is submitted, I will no longer be able to submit additional updates to the investigation case via this online webform. I certify that the information provided on this form is accurate to the best of my knowledge.\*

**Note:** You will receive a confirmation email upon successfully submitting this report. The email will be sent to the email address you entered on the authorization page. Upon clicking Submit, please check your email to ensure the web-form was successfully submitted.

