



Administrative Action Reporting Mechanism (AARM) Authorized Person Designation Form

Fax: 518-549-0464
Email: aarmap@JusticeCenter.ny.gov

INSTRUCTIONS:

Use this form to designate an Authorized Person (AP) to receive Administrative Action Reporting Mechanism (AARM) emails and to submit information relating to Administrative Actions for subjects with substantiated findings.

Programs required to report administrative actions to the Justice Center must designate an AARM Authorized Person to submit information via a secure Web Application, the Administrative Action Reporting Mechanism.

- Type or print in black ink.
Complete all parts of this form.
Submit a separate form for each AARM Authorized Person.
Return the completed form by submitting to aarmap@justicecenter.ny.gov or faxing to 518-549-0464.

Part 1 - The Authorized Person must sign where indicated.
Part 2 - The Director of the Provider Agency must sign where indicated.
Part 3 - Include the Provider ID for each State agency for which you are a provider. If this section is not completed, your form will be returned.

Form with sections: Part 1. Authorized Person (AP) Information, Part 2. Provider Approval (Director of the Provider Agency must sign below), Part 3. State Oversight Agency Provider/Agency ID Information. Includes fields for name, address, phone, email, and agency codes.