



How to Utilize the ICJI Sexual Assault Kit Form

1. Navigate to <http://on.in.gov/trackmykit>.
2. Select **“Submit Forms Here.”**

Submit Forms Here

3. Under **“New Kit,”** select “Yes” if this is a new kit submission:
 - a. Selecting “Yes” will disable the **“PIN”** field. Upon submission of the form, a claims analyst will review the documentation and email you a PIN associated with the Kit Number.
4. Under **“Anonymous Kit,”** select “Yes” if this an anonymous kit.
 - a. This will disable the **“Victim Last Name”** field.
 - b. Type the victim’s **MRN** in the **“Victim First Name”** field.
5. Type your name in the **“Submitter Name”** field.
6. Type your phone number, including area code, in the **“Submitter Phone Number”** field without any special characters.
 - a. Example: 3175551234
7. Type the kit number in the **“Kit Number”** field.
8. If this is an update to a kit, type the PIN in the **“PIN”** field.
9. If this is not an anonymous kit, type the victim’s first name in the **“Victim First Name”** field.
10. If this is not an anonymous kit, type the victim’s last name in the **“Victim Last Name”** field.
11. Type the name of the service provider who conducted the sexual assault kit in the **“Service Provider Name”** field.
12. If the kit has been provided to a law enforcement agency, type the agency name in the **“Law Enforcement Agency Kit was Given To”** field.
13. Select the date that the kit was collected in the **“Date Kit Collected”** field.
14. Select the date that the crime occurred in the **“Date of Crime”** field.
15. Select the kit’s current location as of the time of submitting the form in the **“Kit Location”** field.
16. Select **“Submit.”**

If this is a new kit, a claims analyst will send a PIN associated with the kit number to your email as soon as it is processed. If we have any questions, we will call you at the phone number you provide.