



Client Assignment and Registration System
Texas Department of Mental Health and Mental Retardation

CARE-NRS1

Component Non-Residential Services & Case Management

(Action Code 610)

Rev. 4/87

Component

Action

Add:

Change:

Delete:

Service Name: _____ Code

Service Located in the Following Cities:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Service Located in the Following Counties:

<input type="text"/>						
<input type="text"/>						
<input type="text"/>						

Description: _____

Completed By: _____ Date: _____

Component Non-Residential Services & Case Management (CARE-NRS1)

Field Name	Type	Contents
ACTION ADD	O/R	You must check this box if data is to be added to CARE.
ACTION CHANGE	O/R	You must check this box if data is a change to data already in CARE.
ACTION DELETE	O/R	You must check this box if data is to be deleted from CARE.
COMPONENT	R	Component code.
SERVICE NAME	R	Up to 35 characters may be used to record the name of the service.
CODE	R	Three-digit code representing the service.
SERVICE LOCATED IN THE FOLLOWING CITIES	R	Up to 18 fields for recording city(s) in which the service is located. At least one city is required.
SERVICE LOCATED IN THE FOLLOWING COUNTIES	R	Up to 18 fields for recording 3-digit county code(s) of the county(s) the service is located in. At least one county is required. County Codes and Local Service Areas
DESCRIPTION	R	Up to 225 characters may be used to record a description of the service.
COMPLETED BY	R	Signature of person completing form.
DATE	R	Date form is completed.