



DECRS Online Access Application

Regional User

(Access to the DECRS system is limited to enrolled professionals who meet the requirements as established by Birth to Three - Administration.)

User Information – PLEASE PRINT

New User Information

Change of Information - Please indicate the type of change:

Delete Access*

Modify Access

User First Name & Last Name _____

User Email Address _____

Phone () _____ **EXT** _____ **Mobile Carrier** _____

Preferred Authentication Method ☐ **Text** ☐ **Email**

Please enter a User ID, Security Question and Answer and a four-digit PIN number. The User's ID or email address may not be duplicated. Please submit a second choice for a User ID in the event the first User ID listed is not available. The Security Question and Answer and last PIN number is used for user identification/verification and will be required when contacting Birth to Three - Administration for user access. Neither the Security Answer nor the PIN will be used for initial password set-up.

User ID 1) _____ **2)** _____

Security Question (Please choose 1):

What is your mother's maiden name?

What was the name of your first pet?

What is the name of the street where you grew up?

Answer to Security Question _____

PIN (4 digits) _____

** Deleting Online Access does not end the User's enrollment Birth to Three - Administration.*

User Regional Access

Please select a single Region: (If requesting access to both regions, a separate form must be filled out a different username must be used.)

Region 1 – New Castle

Region 2 – Kent / Sussex

User Signature: _____ **Date** _____

Administrator Signature: _____ **Date** _____

The date the information is received and processed at Birth to Three - Administration office will determine the effective date of online access. An email will be sent to the user's email address with further directions on how to access the system. **Please keep a copy of the form for your records.**

Please complete this Application and mail, fax or email to:
Birth to Three Early Intervention Program – Administration
Attn: Part C Data Manager
410 Federal Street, Suite 7
Dover, DE 19901

[Email: DHSS_DPH_BirthtoThree@Delaware.Gov](mailto:DHSS_DPH_BirthtoThree@Delaware.Gov)
[Phone: 302-739-2730](tel:302-739-2730); [Fax 302-622-4141](tel:302-622-4141)