

NCTAMS LANT Detachment Hampton Roads Video Operations Center Request Form

Fill out the shaded gray areas and email to NCTLDHR_NFLT_VTC_MANAGER@NAVY.MIL

CHECK ONE UNCLAS <input type="checkbox"/> SECURE <input type="checkbox"/> ALLIED <input type="checkbox"/>	Tech Support: (757) 836-0382/8658/7962	CONFERENCE # LEAVE BLANK	CONFERENCE DATE:
RATE/SPEED 128K or 384k G.728/H.261	SET UP TIME EDT	START TIME EDT	END TIME 0000Z
SUBJECT		DATE SKED LEAVE BLANK	Flag or General Officer VTC = Y <input type="checkbox"/> or N <input type="checkbox"/> Senior Ranking Name:
LIST SITES	ORIG/PART	SITE LEAVE BLANK	PLEASE CHECK ONE <input checked="" type="checkbox"/> VIXS ISDN dial out # 505-474-1701 (DSN) <input type="checkbox"/> IP Connect <input type="checkbox"/> Timeplex Channel <input type="checkbox"/> DVS Direct (KIV-7 & Commercial ISDN Lines) <input type="checkbox"/> DVS via AT&T (Please Provide SITE ID)
	ORIG		POC/PHONE #/REMARKS
	PART	LEAVE BLANK	<input checked="" type="checkbox"/> VIXS ISDN dial-in # <input type="checkbox"/> IP Connect <input type="checkbox"/> Timeplex Channel <input type="checkbox"/> DVS Direct (KIV-7 & Commercial ISDN Lines) <input type="checkbox"/> DVS via AT&T (Please Provide SITE ID)
	PART	LEAVE BLANK	<input type="checkbox"/> VIXS ISDN dial-in/out # <input type="checkbox"/> IP Connect <input type="checkbox"/> Timeplex Channel <input type="checkbox"/> DVS Direct (KIV-7 & Commercial ISDN Lines) <input type="checkbox"/> DVS via AT&T (Please Provide SITE ID)
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Provide SITE ID)

SCHEDULING PROCEDURES

Fill out the shaded gray areas and email to **NCTLDHR_NFLT_VTC_MANAGER@NAVY.MIL**. I will then review it and verify bridge availability, you will receive a response within 24hrs confirming or denying the conference along with the assigned dial-in numbers. Ensure that you list good tech POC's for each site. If you have any questions please feel free to call or email me.

NOTE: When submitting VTC requests please provide accurate point of contact (POC) information for all individuals involved in connection and/or troubleshooting of conference. Please submit Command names in long title and Plain Language Address (PLA) format to support record message processing (DMS Message processing). Upon completion of conference we're required to provide after action message to provide detailed status of VTC conferences. Please submit all requested information on the VTC request form no later than 48-72 hours prior to VTC or submit requested information separate from the VTC request but no later than 24 hours prior to the start of the VTC. Failure to submit requested information could result in service interruption or disconnections. Our goal is to provide the best, reliable, and accurate service to our customers. The information requested is extremely vital in the processing and connection of the VTC. Failure to provide the information would severely impact our services to our customers.

Criteria for determining a successful VTC:

HAMPTON ROADS Perspective: Successful if all scheduled participants are in the bridge on time and the VTC occurs as scheduled or if any participant fails to join the conference, at no fault to HAMPTON ROADS, and the originator is able to conduct the VTC.

Originator/Host Perspective: Successful if all scheduled participants are in the bridge on time and the VTC occurs as scheduled or if any participant fails to join that is deemed, by the host, not to be a key player and the originator is able to conduct the VTC.

If any site has problems or questions please contact

VTC MANAGER- 757-836-7962
Dsn-836-7962

TECH SUPPORT -757-836-0382/8658
Dsn-836-0382/8658

WATCH FLOOR -757-836-5511
Dsn-836-5511

CWO - 757-836-5836
Dsn-836-5836

NCTLDHR
MONITORING

YES NO

Scheduled By: NCTLDHR VTC MANAGER

TCF(S) – TECH CONTROL(S)

ORIG/PART – ORIGINATOR/PARTICIPANT

NCTAMS PAC VTC Request Form Email form to NCTP.VIXS.FCT@NAVY.MIL



Date of this VTC Request		VTC CLASSIFICATION:	
Name		<input type="checkbox"/> UNCLASSIFIED	<input type="checkbox"/> US SECRET
Email		<input type="checkbox"/>	<input type="checkbox"/> ALLIED SECRET
		VTC Date in Zulu	
Phone Number Commercial / DSN			
		VTC (START TIME IN	VTC (END TIME IN ZULU)
SUBJECT OF VTC:			
ADDITIONAL COMMENTS:			
HOST and Participants, * DVS-G site ID if applicable: If on a ship- please state THE SHIP's		FLAG LEVEL YE <input checked="" type="checkbox"/> NO <input type="checkbox"/>	VTC POC, Phone Number DSN and / or Commercial
		FLAG NAME:	
1. (HOST)			POC:
DVS-G Site ID			Phone:
2. Participant			POC:
DVS-G Site ID			Phone:
3. Participant			POC:
DVS-G Site ID			Phone:
4. Participant			POC:
DVS-G Site ID			Phone:
5. Participant			POC:
DVS-G Site ID			Phone:
6. Participant			POC:
DVS-G Site ID			Phone:
7. Participant			POC:
DVS-G Site ID			Phone:
8. Participant			POC:
DVS-G Site ID			Phone:
9. Participant			POC:
DVS-G Site ID			Phone:
10. Participant			POC:
DVS-G Site ID			Phone:
11. Participant:			POC:
DVS-G Site ID			Phone:
12. Participant:			POC:
DVS-G Site ID			Phone:
13. Participant:			POC:
DVS-G Site ID			Phone:

Email form to: nctp.vixs.fct@navy.mil & vtc.cpf@navy.mil