

Infrastructure Forms

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Infrastructure Electronic Forms

Forms contained include

- Application & File Server Inventory
- Background Check Authorization
- Blog Policy Compliance Agreement
- BYOD Access and Use Agreement
- Change and Patch Management Control Log - (EXCEL)
- Company Asset Employee Control Log
- Email – Employee Acknowledgement
- Employee Termination Checklist
- Enterprise Owned Equipment Inventory
- FIPS 199 Assessment
- Google Glass Access and Use Agreement
- Incident Communication Contacts
- Internet Access Request
- Internet & Electronic Communication Employee Acknowledgement
- Internet Access Request
- Internet Use Approval
- Interview Questionnaire
- Job Evaluation Questionnaire
- Mobile Device Access and Agreement
- Mobile Device Security and Compliance Checklist
- New Employee Security Acknowledgement and Release
- Non-Disclosure Agreement
- Outsourcing and Cloud Security Compliance Agreement
- Outsourcing Security Compliance Agreement
- Pandemic Planning Checklist
- Preliminary Security Audit Checklist
- Privacy Compliance Policy Acceptance Agreement
- Security Access Application
- Security Audit Report
- Security Violation
- Sensitive Information Policy Compliance
- Social Network Compliance Agreement
- Telecommuting IT Checklist
- Telecommuting Work Agreement
- Text Messaging Sensitive Information
- Threat and Vulnerability Assessment
- Wearable Device Access and Use Form
- Work From Home Contact Information
- Work From Home IT Checklist
- Work From Home Work Agreement
- **Disaster Recovery – Business Continuity**
 - DR/BC Site Evaluation Checklist
 - LAN Node Inventory
 - Location Contact Numbers
 - Off-Site Inventory
 - Pandemic Planning Checklist
 - Personnel Location
 - Plan Distribution
 - Remote Location Contact Information
 - Server Registration
 - Team Call List
 - Vendor List
 - Vendor Partner Questionnaire
- **Retention Schedule**
 - Administrative Records
 - Computer and Information Security Records
 - Computer Operations & Technical Support
 - Data Administration
 - Facility Records
 - Financial Records
 - General Systems and Application Development
 - Mobile Device Access and Use
 - Network and Communication Svc
 - Personnel Records
 - Safety Records
 - Sales Records
 - User and Office Automation Support
- **Safety Records**
 - Area Safety Inspection
 - Employee Job Hazard Analysis
 - First Report of Injury
 - Inspection Checklist – Alternative Locations
 - Inspection Checklist - Computer Server Data Center
 - Inspection Checklist – Office
 - Inspection Checklist - WFH
 - New Employee Safety Checklist
 - Safety Program Contact List
 - Training Record
 - OSHA – 300 Log
 - OSHA – 300A Summary
 - OSHA – 301 Injury and Illness

Blog Policy Compliance Agreement

Employee Name _____ ID Number _____

Job Title _____ Location _____

I hereby certify that I have reviewed ENTERPRISE’s Blog Policy and understand the policy, its standards, and procedures contained therein.

- I understand that if I violate this policy, its standards or procedures, I am subject to immediate termination without recourse.
- I understand that my employment with ENTERPRISE requires me to disclose any outside blogging efforts and any potential conflicts of interest that may arise from those efforts.

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By signing this

Signature _____ Date _____

Blog Name	Blog Address	User ID used

Job Evaluation Questionnaire

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Position / Name: _____

Job Code _____

Exempt Status: _____

Instructions:

The Job Evaluation Questionnaire is comprised of three sections:

1: *Position Attributes* have been displayed in matrix format. The attribute categories are:

- Overall Skills
- Job Knowledge
- Latitude
- Leadership Skills
- Analytical Skills
- Consequence of Error

1. does
2. provi
hierarchical within their group.

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and five is absolute. Select zero (0) if the attribute
under evaluation. Verify the information provided,
Peer and Subordinate Positions boxes are not
Additional boxes are provided for convenience only and do not have to be completed.

3. *General Information* about the position. Please answer each question as completely as possible.

Completed By: _____ Dated: _____



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Risk Assessment Matrix

Location _____ Function _____
 Department _____ Manager _____

	High = 5	4	3	2	Low = 1	Score
Organizational Uncertainty	The business unit has no plan. Management is uncertain about responsibility there is no business sponsor	The business unit has no specific and has designated, but not committed, resources to the initiative	The business unit has a plan but has not committed resources	The business unit has no specific plan but has committed resources	The business unit has a plan and has committed resources	
Technical Uncertainty	No knowledge or experience	Emerging area	Some experience	Understood in a different area	Understood	
Skills Required	Extensive new skills for both staff & management	Extensive new skills for staff; some new skills	Some new skills required for both staff & management	Some new skills for staff; none for management	No new skills for staff & management	
Hardware Dependencies	Hardware immature emerging technology				Similar technology	
Software Dependencies	Non-standard software with interface				Software; programming required	
Application Software	No package or solution exists. Complex design and development is required	Programs available commercially, but highly complex. Complex design and development	Programs available commercially with extensive modifications OR Programs can be developed in-house with moderate complexity	Programs available commercially with minimal modifications OR Programs can be developed in-house with minimal complexity	Programs exist & need minimal modification	
Total Technical Uncertainty Score						
Infrastructure Uncertainty	Major changes to the existing infrastructure are needed	Significant changes to the existing infrastructure are needed	Moderate changes to the existing infrastructure are needed	Small changes are required to the existing infrastructure. Investment is needed	The solution will use existing infrastructure and services no investment is required	
Total Risk Score						

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Work From Home Work Agreement

The following constitutes an agreement on the terms and conditions of telecommuting on (Date) between:

Employee Signature	Date
Supervisor	Date

Employee agrees to participate in telecommuting and to adhere to applicable guidelines and policies. This is not a guarantee of continued employment.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Employee agrees to participate in telecommuting for an initial period not to exceed one year, beginning _____ and ending _____. This agreement may be extended beyond the initial one-year period, if agreeable to the ENTERPRISE and the employee. If extended, the terms of this agreement should be reviewed and updated as necessary. This agreement can be terminated at any time by ENTERPRISE without notice.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
ENTERPRISE concurs with employee participation and agrees to adhere to applicable guidelines and policies.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Copies of the ENTERPRISE Telecommuting Policy and Record Management have been given to and read by the employee.	<input type="checkbox"/> YES	<input type="checkbox"/> NO

Work Location – Schedule

Employee’s central workplace is:

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to

At the WFH location, employee’s work hours will normally be from _____ to _____

on the following days:

Employee’s time and attendance will be recorded the same as performing official duties at the central workplace.

Supervisors will maintain a copy of the employee’s work schedule, and the employee’s time and attendance will be recorded the same as if performing official duties at the central workplace.

Dept. Head _____	Approval Process
<input type="checkbox"/> Approved	IT Department _____
Signature _____	User Level
Comments	<input type="checkbox"/> Approved <input type="checkbox"/> Basic user <input type="checkbox"/> Supervisor <input type="checkbox"/> Manager <input type="checkbox"/> Administrator
Date: _____	

Disaster Recovery Business Continuity Electronic Forms

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Disaster Recovery Electronic Forms

Forms contained include:

- Disaster Recovery – Business Continuity Site Evaluation Checklist
- Disaster Recovery – Business Continuity LAN Node Inventory
- Disaster Recovery – Business Continuity Location Contact Numbers
- Disaster Recovery – Business Continuity Off-Site Inventory
- Disaster Recovery – Business Continuity Personnel Location
- Disaster Recovery – Business Continuity Plan Distribution
- Disaster Recovery – Business Continuity Remote Location Contact Information
- Disaster Recovery – Business Continuity Server Registration
- Disaster Recovery – Business Continuity Team Call List
- Disaster Recovery – Business Continuity Vendor List
- Work From Home Contact Information
- Pandemic Planning Checklist
- Vendor / Partner Questionnaire

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Disaster Recovery Business Continuity Site Evaluation

This form is used to evaluate potential DR/BC sites and in the auditing process of sites that are approved DR/BC locations as defined in the DR/BC Plan

Site Name: _____ Location: _____

Contact: _____ Phone/email: _____

Phone at Location: _____ Date: _____

Describe the Site:

Power – Is the power available adequate to meet current and future needs YES NO

Location - Is the location of the facility beneficial to the enterprise? Are there multiple geographically diverse sites to support future business expansion or disaster recovery site options? YES NO

Resiliency - With what other threats? YES NO

Security & Protection YES NO

Carrier Diversity - Do they allow interconnectivity? Do YES NO

Scalability - Can the facility support higher density utilization? YES NO

Service Level Agreement (SLA) - What level of availability does the facility provide? YES NO

Compliance - Is the facility audited by a third party? Has the audit been reviewed? YES NO

Cost - Does this facility offer the right combination of price and performance for your future infrastructure needs? YES NO

Support - Is technical support available 24/7? What is the process for addressing support issues? YES NO

Amenities - Does the facility offer workspace and conference rooms to enable productivity for employees? YES NO

Environment - Does the facility adhere to energy-efficient industry standards (LEED, ENERGY STAR, Green Globes)? YES NO

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Summary Comments _____

Signature _____

Date _____



PANDEMIC PLANNING CHECKLIST

Electronic form that is filled out as part of the Disaster Recovery and Business Continuity Planning process.



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Electronic Form that is provided to vendors and partners as part of the Disaster Recovery and Business Continuity Planning process

Vendor Partner Checklist



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IT Service Management Electronic Forms

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IT Service Management Electronic Forms

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- BYOD Access and Use Agreement
- Change Patch Management Log
- Email - Employee Acknowledgment
- Internet Access Request
- Internet & Electronic Communication - Employee Acknowledgment
- Internet Use Approval – Electronic Form
- Security Access Application
- Sensitive Information Policy Compliance Agreement
- Social Networking Policy Compliance Agreement
- Telecommutint IT Checklist
- Telecommuting Work Agreement
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- Work From Home IT Checklist
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Electronic Forms

for

Record Management, Retention, and Disposition

Records Retention and Disposition Forms

Forms contained include:

- Administrative Records
- Computer and Information Security Records
- Computer Operations and Technical Support
- Data Administration
- Facility Records
- Financial Records
- General Systems and Application Development
- Mobile Device Access and Use Agreement
- Network and Communication Services
- Personnel Records
- Safety Records
- Sales Records
- User and Office Automation Support
- Work From Home IT Checklist

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Safety Program

Forms

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Safety Program Electronic Forms

Forms contained include:

- ▶ Area Safety Inspection
- ▶ Employee Job Hazard Analysis
- ▶ First Report of Injury
- ▶ Inspection Checklist – Alternative Locations
- ▶ Inspection Checklist - Computer Server Data Center
- ▶ Inspection Checklist – Office Locations
- ▶ Inspection Checklist – Work From Home Location
- ▶ New Employee Safety Checklist
- ▶ Safety Program Contact List
- ▶ Training Record
- ▶ OSHA Electronic Forms (Excel and PDF) – must file electronically.
 - OSHA 300
 - OSHA 300A
 - OSHA 301
 - or
 - OSHA-RK-Forms-Package

The electronic forms can be utilized as word documents (.docx) and PDF (.pdf) and filled in.

The PDF files for the forms can be filled in using Adobe Acrobat Reader - a free program. Note that you will need to make a unique copy of the form that will be filled in. Then once it is saved you can view it directly on any mobile device or it can be printed.

The easiest way to transport the PDF file is via a cloud file sharing tool.

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Work From Home IT Checklist

Both the employee and supervisor should initial each piece of equipment in the issued box and returned box with the equipment is issued or returned.

Employee:	Department:
Location:	Supervisor:
Phone at Location:	Date:

The alternate work location is located (check one):

in home
 not in home

Hardware Requirements

- | | | |
|---|------------------------------|-----------------------------|
| • Base Platform (e.g. laptop, desktop with monitor, tablet) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Printer | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Microphone / headset | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Camera for video conference | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

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Commu

- | | | |
|--|------------------------------|-----------------------------|
| • Instant Messaging | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • File Sharing | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Records retention and destruction policies | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

Security and Compliance Requirements

- | | | |
|---|------------------------------|-----------------------------|
| • Two-factor access (password plus biometrics) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Enciphering | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Disaster Recovery Business Continuity plan | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Physical Security of all electronic assets located remotely | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • User access to admin functions blocked | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Media copying blocked (CD/DVD/USB connectivity) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Training for telecommuter | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

Other Considerations

- | | | |
|--|------------------------------|-----------------------------|
| • Reimbursement policy for WFH work-related expenses | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Policy for non-business use of enterprise assets | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Inventory of data and enterprise physical assets | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Rules for audit and termination procedures for employees | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| • Records Management procedures Implemented for WFH | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

Employee Signature Date

Supervisor Date

Security Electronic Forms

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Threat and Vulnerability Assessment Physical and IT / Electronic Sites

Risk Ranking

Impact of Loss	Vulnerability (Probability of Threat)				
	Will Occur over 90%	Extreme 90% < >75%	High 75% < >25%	Moderate 25% < >10%	Low Under 10%
<i>Catastrophic</i>					
<i>Very High</i>					
<i>Noticeable to ENTERPRISE</i>					
<i>Minor</i>					
<i>None</i>					

Impact of Loss	Risk Point Value				
	Will Occur over 90%	Extreme 90% < >75%	High 75% < >25%	Moderate 25% < >10%	Low Under 10%
<i>Catastrophic</i>	8	7	6	5	4
<i>Very High</i>	7	6	5	4	3
<i>Noticeable to ENTERPRISE</i>	6	5	4	3	2
<i>Minor</i>	5	4	3	2	1
<i>None</i>	0	0	0	0	0

Interpretation of scores	
6 to 8	These risks are extreme. Countermeasure actions to mitigate these risks should be implemented
1 to 2	These risks are low. Countermeasure actions to mitigate these risks should be implemented as convenient as they will enhance security overall.
0	These currently pose no risk but should continue to be monitored.

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