

Information Systems Survey Worksheet

Department of Defense Education Activity

Complete one worksheet for each electronic information system in coordination with your system administrator, Division Chief, and subject matter expert. Submit the completed form to HQ-RecordsManagement@hq.dodea.edu .

POC:

DIVISION/SECTION:

DATE:

1. **What is the name of the system?** (Indicate the commonly used name and acronym of the system)
2. **What is the purpose of the system and which program does it support?** (Describe what the system does, the requirements it meets, and any authorizing laws or directives)
3. **What is the content of the system and what dates does it cover?** (Describe the principal information (persons, places, or things) that are recorded in the system and who provides the information. Provide form names and numbers of forms used for data input, if appropriate. Indicate the beginning and ending dates for the data)
4. **Does this system link to or support any other system?** (Provide the names of other systems, either inside the agency or outside of it, that provide data to or receive data from this system)

5. **What are the sources of input for this system?** (Identify which input (if any) must be retained for legal or audit purposes)

6. **What are the outputs from this system?**

a. State the frequency of the output (daily, weekly, monthly, yearly)

b. State the physical form (paper or electronic)

c. The AI-15 file number that applies, if any? (If none provide the main subject matter, the date coverage, and other major characteristics of the output)

d. Length of time the information needs to be kept online/offline:

e. Is the output transferred to another system? (If yes, provide name)

YES NO

7. **What are the applications this system supports/How are the records or the data that make up the records manipulated once they have been input?**

8. **What is/are the name(s) of the agency(ies) responsible for this system?**

9. **Are there restrictions on the release of these records?**

(If yes, please cite the authority for these restrictions?)

YES NO

10. Additional System Questions:

a. Are the records centrally stored and managed? If NO, at what location(s) are the records stored and managed?

YES NO

b. Is the information contained in the system part of the agency's vital records program? If, Yes what provisions have been made to ensure availability in an emergency situation?

YES NO

c. Who has access to the system? How are the risks of unauthorized alteration or erasure minimized?

d. How is the information retrieved? (key words, index, full text search, etc.)

11. Additional Comments: (Any additional information on the system, storage media, or business function(s))