

Filled Out By	Contact	Date	Project / Vendor

Responses to the following are needed from the requesting UNM entity in order to assure appropriate safeguards are in place for services that will collect, store, transmit, or process sensitive data with which UNM is entrusted.

1) Check the appropriate boxes that indicate what will be collected, stored, transmitted, or processed (check all that apply, you must select at least one):

- Social Security Numbers (SSNs)
 You must:
- Attach written authorization from the UNM Data Steward for the use of SSNs. Reference [Data.UNM](#) for more information
 - Attach the [SSN Collection Reporting Worksheet](#) required by UNM Policy 2030, Section 6
- UNM ID Numbers (Banner IDs)
- Name
- Date of Birth (DOB)
- Address
- Payroll Information
- Financial Information
- Grades
- Advisement or Tutoring Records
- Health Information (Medical Record #, Prescriptions, Patient Care/ Information)
- Credit Card Information
- Data otherwise deemed sensitive or private (e.g. Export Control, Research, Intellectual Property, etc.), please describe:
- Public, please describe:
- None of the above, please describe:

2) Please provide the business purpose for the product, system, service, etc.:

3) Please provide a description or list of the individuals who will need to access the information or services:

4) Please provide the locations from which access to the information or system(s) is needed:

- Anywhere
- UNM Campus Only
- Departmental or Specific Staff Only
- Other, please specify:

5) Please provide a diagram that describes the flow of information across relevant workstations and servers

You may paste an image here