

Privacy Impact Assessment Short Form Questionnaire

1. System Identifier

System Name	
Unique Project Identifier (UPI—if applicable)	
Privacy Act System of Records Number (SORN)	To be provided by OMAR
OMB Information Collection Number (if applicable)	

2. System Point of Contact (PoC)

Name	
Title	
Organization	
Email	
Phone	

3. Please provide an overview of the system:

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4. Please indicate whether the system transmits, stores, or process information about the following individuals:

Categories	Yes/No
Employees	
Public Citizens	
Patients	
Business Partners	
Vendors/Suppliers/Contractors	
Other	

NIH ORS and ORF Privacy Impact Assessment
Short Form

5. Does the system transmit, store or process Information in Identifiable Format (IIF)?

Examples of IIF are provided below. Please identify if any of the information types are applicable.

Categories	
Name	
Date of birth	
Social Security Number (or other number originated by a government that specifically identifies an individual)	
Photographic identifiers (e.g., photograph image, x-rays, and video)	
Driver's license	
Biometric identifiers (e.g., fingerprint and voiceprint)	
Mother's maiden name	
Vehicle identifiers (e.g., license plates)	
Mailing address Phone numbers (e.g., phone, fax, and cell)	
Medical records numbers	
Medical notes	
Financial account information and/or numbers (e.g., checking account number and Personal Identification Numbers [PIN])	
Certificates (e.g., birth, death, and marriage)	
Legal documents or notes (e.g., divorce decree, criminal records, or other)	
Device identifiers (e.g., pacemaker, hearing aid, or other) Cell, Blackberry, and or home phone.	
Web Uniform Resource Locators (URL)	
E-mail address	
Education records	
Military status and/or records	
Employment status and/or records	
Foreign activities and/or interest	

6. If the system shares or discloses IIF please specify with whom and for what purpose(s):

7. Please describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information. In this description, indicate whether the information contains IIF and whether submission of personal information is voluntary or mandatory:

8. If the system collects IIF, please describe in detail any processes in place to:

- notify and obtain consent from the individuals whose IIF is in the system when major changes occur to the system (e.g., disclosure and/or data uses have changed since the notice at the time of the original collection)
- notify and obtain consent from individuals regarding what IIF is being collected from them and how the information will be used or shared
- properly retain and/or destroy IIF
- secure the IIF within the system

9. Does the system host a website?

10. If yes, is the website directed towards children under the age of thirteen?