

# PRIVACY IMPACT ASSESSMENT (PIA)

### For the

DCAA Integrated Workplace Management System (DIWMS)

Defense Contract Audit Agency

## **SECTION 1: IS A PIA REQUIRED?**

a. Will this Department of Defense (DoD) information system or electronic collection of
information (referred to as an "electronic collection" for the purpose of this form) collect,
maintain, use, and/or disseminate PII about members of the public, Federal personnel,
contractors or foreign nationals employed at U.S. military facilities internationally? Choose
one option from the choices below. (Choose (3) for foreign nationals).

	(1)	Yes, from members of the general public.
	(2)	Yes, from Federal personnel* and/or Federal contractors.
	(3)	Yes, from both members of the general public and Federal personnel and/or Federal contractors.
$\boxtimes$	(4)	No

- b. If "No," ensure that DITPR or the authoritative database that updates DITPR is annotated for the reason(s) why a PIA is not required. If the DoD information system or electronic collection is not in DITPR, ensure that the reason(s) are recorded in appropriate documentation.
- c. If "Yes," then a PIA is required. Proceed to Section 2.

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<sup>\* &</sup>quot;Federal personnel" are referred to in the DoD IT Portfolio Repository (DITPR) as "Federal employees."

## **SECTION 2: PIA SUMMARY INFORMATION**

a.	Why	is this PIA being	created or upda	ted? Cho	ose one:	
		New DoD Informa	tion System		New Electroni	c Collection
		Existing DoD Info	rmation System		Existing Elect	ronic Collection
		Significantly Mod System	ified DoD Informa	tion		
		s DoD information Network (SIPRNE		ered in the	DITPR or the	DoD Secret Internet Protocol
		Yes, DITPR	Enter DITPR Sys	stem Identific	cation Number	
		Yes, SIPRNET	Enter SIPRNET I	dentification	n Number	
		No				
		this DoD information 53 of Office of				que Project Identifier (UPI), requirec ar A-11?
		Yes		No		
	If "Y	es," enter UPI				
		If unsure,	consult the Compo	nent IT Budo	get Point of Conta	act to obtain the UPI.
		this DoD informa s Notice (SORN)?	•	electronic	collection req	uire a Privacy Act System of
	or law		idents that is <u>retrieve</u>			contains information about U.S. citizens ntifier. PIA and Privacy Act SORN
		Yes		No		
	If "Y	es," enter Privacy <i>i</i>	Act SORN Identific	er		
		Consult the Comp	assigned designator onent Privacy Office cy Act SORNs at: I	for addition	al information or	
		or				
	Date	of submission for a Consult the C	approval to Defenomponent Privacy (			

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This number indicates OMB approval to collect data from 10 or more members of the public in a 12-month period regardless of form or format. Yes **Enter OMB Control Number Enter Expiration Date** No f. Authority to collect information. A Federal law, Executive Order of the President (EO), or DoD requirement must authorize the collection and maintenance of a system of records. (1) If this system has a Privacy Act SORN, the authorities in this PIA and the existing Privacy Act SORN should be the same. (2) Cite the authority for this DoD information system or electronic collection to collect, use, maintain and/or disseminate PII. (If multiple authorities are cited, provide all that apply.) (a) Whenever possible, cite the specific provisions of the statute and/or EO that authorizes the operation of the system and the collection of PII. (b) If a specific statute or EO does not exist, determine if an indirect statutory authority can be cited. An indirect authority may be cited if the authority requires the operation or administration of a program, the execution of which will require the collection and maintenance of a system of records. (c) DoD Components can use their general statutory grants of authority ("internal housekeeping") as the primary authority. The requirement, directive, or instruction implementing the statute within the DoD Component should be identified.

e. Does this DoD information system or electronic collection have an OMB Control Number? Contact the Component Information Management Control Officer or DoD Clearance Officer for this information.

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	) Describe the purpose of this DoD information system or electronic collection and briefly
	escribe the types of personal information about individuals collected in the system.
(2)	) Briefly describe the privacy risks associated with the PII collected and how these risks
ad	ddressed to safeguard privacy.
	whom will the PII be shared through data exchange, both within your DoD Compone
	whom will the PII be shared through data exchange, both within your DoD Componer (e.g., other DoD Components, Federal Agencies)? Indicate all that
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e y V	vour Component (e.g., other DoD Components, Federal Agencies)? Indicate all that
e y V	vour Component (e.g., other DoD Components, Federal Agencies)? Indicate all that
e y V	Vour Component (e.g., other DoD Components, Federal Agencies)? Indicate all that Within the DoD Component.  Specify.
e y V	Vour Component (e.g., other DoD Components, Federal Agencies)? Indicate all that Within the DoD Component.  Specify.  Other DoD Components.
e y V	Vour Component (e.g., other DoD Components, Federal Agencies)? Indicate all that Within the DoD Component.  Specify.  Other DoD Components.  Specify.
e y v S O	Vour Component (e.g., other DoD Components, Federal Agencies)? Indicate all that Vithin the DoD Component.  Specify.  Other DoD Components.  Specify.  Other Federal Agencies.
e y V S O S S	Vithin the DoD Components, Federal Agencies)? Indicate all that Within the DoD Components.  Specify.  Other DoD Components.  Specify.  Other Federal Agencies.  Specify.
v v s s s s s s	Vithin the DoD Component.  Specify.  Other DoD Components.  Specify.  Other Federal Agencies.  Specify.  Other Federal Agencies.  Specify.
e y V S O S S S	Vithin the DoD Component.  Specify.  Other DoD Components.  Specify.  Other Federal Agencies.  Specify.  State and Local Agencies.  Specify.

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	Yes	□ No
	(1) If "Yes,"	describe method by which individuals can object to the collection of PII.
	(2) If "No," s	tate the reason why individuals cannot object.
j. Do	individuals h	ave the opportunity to consent to the specific uses of their PII?
	Yes	□ No
	(1) If "Yes,"	describe the method by which individuals can give or withhold their consent.
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k. What infor apply.	mation is provided to an individu	al whe	en asked to provide PII data? Indicate all that
Priva	cy Act Statement		Privacy Advisory
Othe	r		None
Describe each applicable format.			

#### NOTE:

Sections 1 and 2 above are to be posted to the Component's Web site. Posting of these Sections indicates that the PIA has been reviewed to ensure that appropriate safeguards are in place to protect privacy.

A Component may restrict the publication of Sections 1 and/or 2 if they contain information that would reveal sensitive information or raise security concerns.

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## **SECTION 3: PIA QUESTIONNAIRE and RISK REVIEW**

a. For the questions in subparagraphs 3.a.(1) through 3.a.(5), indicate what PII (a data element alone or in combination that can uniquely identify an individual) will be collected and describe the source, collection method, purpose, and intended use of the PII.

(1) What PII will be collec	ted? Indicate all individual F	Il or PII groupings that apply below.
□ Name	Other Names Used	☐ Social Security Number (SSN)
☐ Truncated SSN	☐ Driver's License	☐ Other ID Number
☐ Citizenship	☐ Legal Status	Gender
☐ Race/Ethnicity	☐ Birth Date	☐ Place of Birth
Personal Cell Telephone Number	e Home Telephone Number	☐ Personal Email Address
☐ Mailing/Home Address	☐ Religious Preference	☐ Security Clearance
☐ Mother's Maiden Name	☐ Mother's Middle Name	☐ Spouse Information
☐ Marital Status	☐ Biometrics	☐ Child Information
☐ Financial Information	☐ Medical Information	☐ Disability Information
Law Enforcement Information	☐ Employment Information	n   Military Records
☐ Emergency Contact	☐ Education Information	☐ Other
If "Other," specify or explain any PII grouping selected.		
		lividual, existing DoD information abases, commercial systems)?
Describe here.		

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	Paper Form			Face-to-Face Contact
	Telephone Interview			Fax
	Email			Web Site
	Information Sharing - Sy	stem to System	1	
	Other			
If "Otl	her," describe here.			
4) \A/lesz	are you collecting the DII	colocted (c. a	verification	identification authorities in
		selected (e.g.	, verification,	identification, authentication
ata mat	tching)?			
Describe	here.			
-> >				
	t is the intended use of	the PII colle	ected (e.g., r	mission-related use,
	t is the intended use of	the PII colle	ected (e.g., r	mission-related use,
dminist	rative use)?	the PII colle	ected (e.g., r	mission-related use,
dminist	rative use)?	the PII colle	ected (e.g., r	mission-related use,
dminist	rative use)?	the PII colle	ected (e.g., r	mission-related use,
dminist	rative use)?	the PII colle	ected (e.g., r	mission-related use,
dminist	rative use)?	the PII colle	ected (e.g., r	mission-related use,
dminist	rative use)?	the PII colle	ected (e.g., r	mission-related use,
dminist	rative use)?	the PII colle	ected (e.g., r	mission-related use,
<b>dminist</b> Describe	here.			
dminist Describe  oes this	here.  s DoD information system	m or electron	ic collection	create or derive new PII ab
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dminist Describe  oes this	here.  S DoD information system through data aggregation	m or electron ? (See Append	ic collection	create or derive new PII ab
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dminist Describe  oes this viduals	s here.  S DoD information systemathrough data aggregation  S S S S S S S S S S S S S S S S S S S	m or electron ? (See Append No	ic collection lix for data aggr	create or derive new PII ab
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(3) How will the information be collected? Indicate all that apply.

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				nave access to all that apply.	PII in	this Do	D infori	mation sys	tem o	r electronic	
		Users		Developers		System	Adminis	strators		Contractors	
		Other									
	If "C	Other," sp	ecify	here.							
d.	How	v will the	PII k	pe secured?							
	(1) [	Physical	conf	trols. Indicate a	ll that	apply.					
		Security	y Gu	ards				Cipher Loc	ks		
		Identific	catio	n Badges				Combination	on Loc	ks	
		Key Car	rds					Closed Circ	cuit TV	/ (CCTV)	
		Safes						Other			
	(2)		ol Co	e <b>ntrols.</b> Indicate	all the	at annly					
	( <b>-</b> /			fication	an tric	х арріў.		Biometrics			
		Passwo		noution				Firewall			
				etection System					ate Ne	etwork (VPN)	
		Encrypt	tion					DoD Public		nfrastructure	
		Externa (CA) Ce		rtificate Authorit ate	У					Card (CAC)	
		Other									
	If "C	Other," sp	ecify	here.							

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(3) Admin	ilstrative Controls. Indicate all that apply.		
☐ Perio	odic Security Audits		
Regi	ular Monitoring of Users' Security Practices	<b>;</b>	
☐ Meth	nods to Ensure Only Authorized Personnel A	Access to PII	
☐ Encr	ryption of Backups Containing Sensitive Dat	ta	
☐ Back	kups Secured Off-site		
☐ Othe	er		
If "Other,"	specify here.		
	DoD information system require certific Assurance Certification and Accreditation		
Yes.	Indicate the certification and accreditation	status:	
	Authorization to Operate (ATO)	Date Granted:	
	Interim Authorization to Operate (IATO)	Date Granted:	
	Denial of Authorization to Operate (DATO)	Date Granted:	
	Interim Authorization to Test (IATT)	Date Granted:	
☐ No, t	his DoD information system does not requir	re certification and	d accreditation.
	ormation handling practices at each sta se, retention, processing, disclosure and	_	
Describe h	nere.		

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Describe here.				
	rmation systems ddress identified		hat measures	are planned for
			hat measures	are planned for
olementation to a			hat measures	are planned for
olementation to a			hat measures	are planned for

g. For existing DoD information systems or electronic collections, what measures have been put in

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