SaaS / Third-Party Pre-Engagement Checklist

Last Revised: 2018 December 10

In order to ensure the best use of limited resources and to confirm integration, support, and compliance requirements, we ask you to complete the following prior to engaging in any agreement to use software-as-a-service (SaaS) offerings for the collection, storage, processing, or sharing of data to support College business. Once you have completed the worksheet, please submit to the Associate Vice President and Dean of Student Development for initial review. We make every effort to review and respond to requests within one week.

	Gene	eral Information	
Your Na <mark>me:</mark>			
Today's Dat <mark>e:</mark>			
Name of Responsible Person (RP):			(if not you)
Pro	duct/	Service Information	
Company Name:			
Product/Service Name:			
Website Address:			
Intended Use of Service:			
		Budgeting	
Initial Installation/Integration:	\$		
Annual (incl. Support/Maint.):	\$		
Funding Source (FOAP if known):			

Usage Questions:

- 1. Does the service provide required functionality beyond that currently available?
- 2. Is the service provided by a reputable, stable business capable of supporting the integration and ongoing maintenance of the service within the College's environment?
- 3. If the service requires authentication, does it integrate with the College's Identity and Access Management (IAM) platforms (e.g. CAS, Shibboleth, and/or Active Directory)?
- 4. Does the service maintain audit logs of access to the service and changes made within the offering? If yes, can those logs be exported (e.g. to a SIEM tool)?
- 5. Does the service provide redundancy or fault tolerance, and if not, do you have a plan should the service be unavailable for any period of time?



- 6. Does the service comply with relevant College policies and procedures?
- 7. Is the service ADA compliant?
- 8. Will you be collecting, storing, or sharing any of the following with (or via) the service?

Data Element	Yes/No	
Social Security Numbe <mark>r</mark>		
Government ID (Passport, Driver's License, etc.)		
Bank or Credit Card Account Information		
Tax Information (Tax Transcripts, Returns, etc.)		
Health Information (Medical/Immunization Records, Forms)		
High School or College Enrollment History/Transcripts/Graduation Info.		
Other Personal Info (Marital Status, Religion, Sexual Orientation, etc.)		
Photographs/Scanned Images of or related to YC constituents		
Personal (non-YC) Contact Information (Phone, Email, Mailing Address)		
Information about Disabilities or Special Needs		
Information about Financial Situation or Need		
Personal, non-public information from anyone other than current students		

- 9. Please identify the specific elements that will be collected/shared/stored using this service (e.g. first/last name, telephone number, student ID, high school attended, etc.)
- 10. How will the information collected or maintained by this service be securely deleted after the retention period concludes?
- 11. Approximately how many records do you anticipate collecting/storing/sharing with this service annually?
- 12. If integration support will be required from the Information Technology Services department, have you consulted with the appropriate individuals on resource availability and allocation?

