Secure Workspace Assessment Form

General Information

| Name |
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| |
| Department Department |
| |
| Data |
| Date |
| |
| Workspace Location |
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| |
| Physical Security |
| |
| Employee ID badge is visible |
| Drawers/cabinets are locked |
| No unauthorized persons present |
| Data Security |
| Screens are locked when unattended |
| Sensitive papers are secured |
| USB devices follow policy |
| |
| Clean Desk Compliance |
| Worken and in class of unprecessors items |
| Workspace is clear of unnecessary items |
| Documents are stored securely |
| Other Observations |
| Comments / Recommendations |
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