

Financial Services Workstation Data Protection Form

Employee Details

Employee Name

Employee ID

Department

Position/Title

Location

Workstation Information

Device Type

Serial Number/Asset Tag

Operating System & Version

Data Protection Measures

Antivirus Installed & Updated?

Disk Encryption Enabled?

Strong Password Policy Enforced?

Automatic Screen Lock Set?

USB/External Storage Restricted?

Additional Notes

Reviewed By

Date