Financial Services IT Risk Assessment Form

| Assessment Date | |
|------------------------------------|----------|
| | |
| Assessed By | |
| | |
| Department/Team | |
| | |
| IT System/Service Name | |
| | |
| Description of IT System/Service | |
| 2 sassipasi o i ii systemiesi viss | |
| | |
| | |
| Risk Identification | |
| Risk Name | |
| | |
| Risk Description | |
| | |
| | |
| Potential Threats | |
| | |
| Vulnerabilities | |
| | |
| | |
| Business Impact | |
| | |
| | |
| Risk Assessment | |
| Likelihood | |
| Lineilliood | ▼ |
| Impact Level | |
| | \ |
| Overall Risk Rating | |
| | |
| Existing Controls | |
| Existing Controls | |
| Existing Controls | |
| | |
| Control Effectiveness | |
| | ▼ |

| Action Plan / Mitigation Steps | |
|--------------------------------|----------|
| | |
| Responsible Person | |
| | |
| Target Completion Date | |
| Status | |
| | <u> </u> |