|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Application or Product** | | | |
| 1 | Who is your Disaster Recovery Point of Contact? | Name Click or tap here to enter text.  Address Click or tap here to enter text.  Phone Number Click or tap here to enter text.  Email Click or tap here to enter text. |  |
| 2 | Do you have disaster recovery documentation which you can provide to us? If yes, please email to [jkinner@luc.edu](mailto:jkinner@luc.edu). | Yes  No |  |
| 3 | What is the Recovery Time Objective (RTO) for this application? | Click or tap here to enter text. |  |
| 4 | How often do you perform DR tests? | Every 3 Months  Every 6 Months  Every 12 Months  Every 2 Years  Never |  |
| 5 | When was your last DR test? | Date: Click or tap here to enter text. |  |
| 6 | What was the Recovery Time Capability (RTC) for your last DR Test: | Click or tap here to enter text. |  |
| 7 | Where geographically are the data centers located | Click or tap here to enter text. |  |
| Additional Comments | | | |
|  | Click or tap here to enter text. | | |

Please send the completed questionnaire and Disaster recovery documentation to [jkinner@luc.edu](mailto:jkinner@luc.edu).

If you have any questions, please contact the Technology Risk & Compliance Team at773-508-8219.