

AUDIT QUESTIONNAIRE

Completion of all items on this questionnaire prior to the audit will reduce the time needed to complete your audit.

| | |
|-------------------|--------------|
| Agency Name | |
| Person Completing | Date |
| Email Address | Phone Number |

AGENCY AGREEMENT

Review and complete the enclosed TIME System Agency Agreement between CIB and your agency. Provide the completed **original** to the auditor on the audit date. This agreement acknowledges your agency's acceptance of and adherence to TIME System / CJIS policy, procedures and rules.

TAC

Each agency having TIME System access must designate an individual as TIME Agency Coordinator (TAC). This person *must be an employee of your agency*. The agency TAC is:

| | | |
|----------------|----|-----------|
| TAC First Name | MI | Last Name |
| Email Address | | |
| TAC First Name | MI | Last Name |
| Email Address | | |

WORKSTATIONS/PSN LIST

Review, complete and sign the enclosed list of TIME System terminals/eTIME users for your agency.

- Are all TIME System terminals and stored/printed data secure within the department to protect against any unauthorized viewing or access? Yes No
- Does your agency have Mobile Data Computers (MDCs) that access the TIME System? Yes No
 - If yes, how does your agency provide MDC certification training via on-line modules or is the training provided by an Agency Assigned Instructor (AAI)?
 - Using online modules
 - Provided by Agency Assigned Instructor

| | | |
|----------------|----|-----------|
| AAI First Name | MI | Last Name |
| AAI First Name | MI | Last Name |

OTHER AGENCY AGREEMENTS

Does your agency provide TIME System services or information (DOT printouts, criminal history printouts, etc.) to any other agency (prosecutor, DNR etc)? Yes No

- If yes, please list the names of those agencies and provide a copy of signed agreements between your department and these agencies. Attach a separate sheet if necessary.

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| Agency Name |
| Agency Name |
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| Agency Name |

CRIMINAL HISTORIES

Enclosed are two lists of criminal histories performed by your agency. Complete the lists by answering the three questions for each inquiry.

- Do you provide criminal history information/printouts to any other authorized agency (prosecutor, city attorney, etc.)? Yes No
 - If yes, is the person you provide the criminal history information to uniquely identified in the attention line of the query? Yes No
 - If no, does your agency log this dissemination as secondary dissemination? Yes No
 - Does your agency maintain this secondary dissemination log for at least 1 year? Yes No

ORI UPDATES

Enclosed are printouts of your agency information as currently listed in Nlets ORION and NCIC ORI files. Review for accuracy, and make any necessary changes.

- Does your agency operate 24 hours per day? Yes No

TIME SYSTEM NEWSLETTERS

TIME System Newsletters are published on the CIB website updating users on new functions and policy. Does your agency distribute the newsletters to personnel that access the TIME System? Yes No

VALIDATION

Does your agency validate person and/or property records that have been entered into CIB / NCIC Files with your ORI? Yes No

- If yes, who is assigned this responsibility?

| | | |
|-------------------------------|----|-----------|
| Validation Officer First Name | MI | Last Name |
| Email Address | | |
| Validation Officer First Name | MI | Last Name |
| Email Address | | |

- Does your agency contact the court clerk during the validation of warrants and protection orders to ensure the warrant/protection order is still active? Yes No

- How are the contacts made and results documented?

- Does your agency contact complainants for missing person, identity theft victim and stolen property records during validation to ensure the person/property is still missing? Yes No

- How are the contacts made and results documented?

- Does your agency perform the **required** second person review of all record entries, modifications and supplements? Yes No

- How is this second person review performed and documented?

- Does your agency have written policies/procedures regarding validation? Yes No

PERSONNEL SECURITY

Does your agency perform thorough background screening of all personnel who have access to TIME System, CJIS systems and TIME/CJIS data, including submission of fingerprints to the FBI and CIB? Yes No

Does your agency perform thorough background screening of all IT personnel that maintain network hardware, terminals, servers, etc. that access the TIME System and CJIS systems including submission of fingerprints to the FBI and CIB? Yes No

How does your agency document the results of the background screening?

Does your agency have written policies regarding discipline of personnel that violate TIME System policies/rules? Yes No

TIME System Rosters

Enclosed you will find rosters of TIME System personnel within your agency. Please review the rosters, indicate a status and complete as instructed.