|  |  |
| --- | --- |
|  |  |

## Data Movement Form

|  |  |  |
| --- | --- | --- |
| Version History | | |
| Author | Date | Version Number |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| Record number |  | (Field to be completed by OST / NOMS IA) |

|  |  |  |
| --- | --- | --- |
| Confirmation of Completion (Date) |  | (Field to be completed by OST / NOMS IA) |

## 1. Application

|  |  |
| --- | --- |
| Full name of person requesting the data transfer |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone number |  |  |  |

|  |  |
| --- | --- |
| Location |  |

2

|  |  |  |  |
| --- | --- | --- | --- |
| Email |  |  |  |

## 2. Describe what is being moved

|  |  |
| --- | --- |
| a. Information Asset to be moved: |  |

b. If the data includes personal data have the privacy risks been identified and mitigated against or accepted?  (This can be done by completing a PIA)  Yes  No  N/A

|  |  |
| --- | --- |
| c. What is the security classification of the data? | OFFICIAL   Is any of the data marked OFFICIAL-SENSITIVE?  YES  NO  SECRET TOP SECRET |

## 3. Why is it being moved?

|  |
| --- |
|  |

## 4. When is this move due to take place?

|  |
| --- |
|  |

## 5. What is the frequency of this move?

This will be a single move only

There will be more than one move

How Frequent?

|  |  |
| --- | --- |
|  |  |

## 6. Where is the Equipment or Data being moved to?

|  |  |
| --- | --- |
| Location / Company |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Security classification level that the destination is approved to handle. |  |  |  |

## 

## 7. Method of Movement Plan

1. How will any data be extracted?

|  |
| --- |
|  |

1. What is the size (in MB or GB) of data to be moved?

|  |
| --- |
|  |

1. Is there a Data Sharing Agreement in place?  Yes  No
2. Name of person performing the extract.

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name | Business Area or Supplier | Phone Number | Security Clearance |
|  |  |  |  |

1. Name of person validating the data extracted is what was expected – (Independent/ authority verification).

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name | Business Area or Supplier | Phone Number | Security Clearance |
|  |  |  |  |

1. Do you need to borrow an approved encrypted mass storage device from Operational Security?

Yes  No

1. Describe how the data will be moved or how the data bearing equipment will be transported.

|  |
| --- |
|  |

1. Who is / are the responsible person(s) involved in the transportation process?

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name | Business Area or Supplier | Phone Number | Security Clearance |
|  |  |  |  |
|  |  |  |  |

## 8. Permission to move: Who is the Information Asset Owner / SRO / Head of Group?

|  |  |
| --- | --- |
| Name of Information Asset Owner (IAO / SRO / Head of Group) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone number |  |  |  |

|  |  |
| --- | --- |
| Email |  |

Has the IAO / SRO / Head of Group given approval for the move?  Yes  No

**9. Confirmation / Completion**

1. How and when will confirmation be received to confirm that the move has been successful?

|  |
| --- |
|  |

1. Who will be confirming receipt?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Full Name | Business Area or Supplier | Phone Number | Security Clearance |
| Confirming Receipt |  |  |  |  |
| Accepting Confirmation |  |  |  |  |

1. Will any temporary Storage Device be securely erased / destroyed when the move is completed?

Yes  No

(If Yes - Please provide details)

|  |
| --- |
|  |

d. Who will be confirming that the destruction of the data has been successfully completed?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Full Name | Business Area or Supplier | Phone Number | Security Clearance |
| Confirming Destruction |  |  |  |  |
| Accepting Confirmation |  |  |  |  |

## 

## 10. DMF Decision

Application  Approved  Refused

|  |  |
| --- | --- |
| Notes if applicable |  |

|  |  |
| --- | --- |
| Name of person making this decision |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date |  |  |  |

## 11. In case of any incident please contact:

* [Security@justice.gov.uk](mailto:Security@justice.gov.uk) - (All cases)
* [OperationalSecurityTeam@justice.gov.uk](mailto:OperationalSecurityTeam@justice.gov.uk) - (Non-HMPPS cases)
* [InformationMgmtSecurity@justice.gov.uk](mailto:InformationMgmtSecurity@justice.gov.uk) - (HMPPS cases)

**Appendix A**

 This is page [Insert Number     ]  of [Insert Number     ]  from the DMF referenced [Insert Change Ref or DMF Ref     ]  which refers to the movement of a total of [Insert Number     ]  assets

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Device** | **Asset Number** | **Make/Model** | **Serial Number** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
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| 27 |  |  |  |  |
| 28 |  |  |  |  |
| 29 |  |  |  |  |
| 30 |  |  |  |  |

I certify that I have taken receipt of the 30 assets described above

Signed Witnessed by

Dated Dated

Name Name

Company Company

I certify that I have accepted delivery of the 30 assets described above

Signed Witnessed by

Dated Dated

Name Name

Company Company