

NASA Privacy Impact Assessment (PIA) Analysis Worksheet

Section 1 - System Identification

a. System Name:

**JSC AD - Women in STEM High School
Aerospace Scholars - <http://TBD>**

(generally the name that the system is accessed by. www.nasa.gov, when Web enabled, for example)

b. System Owner/Information Owner:

Person responsible for funding

LINDA KAY. SMITH

Phone Number:281.483.7086

E-Mail:linda.k.smith@nasa.gov

c. System Manager:

Person responsible for technical operation

Valerie King

Phone Number: 281.483.5888

E-Mail: valerie.l.king@nasa.gov

d. Person preparing IPTA/PIA:

Linda Smith

Phone Number: 281.483.7086

E-Mail: Linda.k.smith@nasa.gov

e. System Description:

On-line STEM learning experience for female high school juniors

f. Mission Program/Project Supported:

Education Office/WISH

g. System Security Plan Number:

NN-001-M-JSC-9010

h. System Location:

(Center or contractor office building, room, city and state)

Center:JSC

Street Address:2101 NASA Parkway

Building:

City:Houston

State:TX

ZIP:77062

i. Status of the System:

Development

* As used in this document "System" means an organized collection of information which may encompass IT hardware systems, applications, and databases. "System" may be an infrastructure, one or more applications, one or more databases, an electronic information collection, or any combination thereof.

	Response	Comments
Section 2 - Privacy Impact Assessment Initial Screening Must be completed for all systems.		
a. Is this a new system or has any of the major changes listed in the Comments column occurred to the system since the conduct of the last IPTA/PIA?	<input checked="" type="radio"/> New System/Project <input type="radio"/> Previously not assessed <input type="radio"/> Re-evaluation <input type="radio"/> Major Change	If Major Change selected, choose one of the following <input type="checkbox"/> Conversions <input type="checkbox"/> Anonymous to Non-Anonymous <input type="checkbox"/> Significant System Management Changes <input type="checkbox"/> Significant Merging <input type="checkbox"/> New Public Access <input type="checkbox"/> Commercial Sources <input type="checkbox"/> Internal Flow or Collection <input type="checkbox"/> New Interagency Use <input type="checkbox"/> Alteration in Character of Data <input type="checkbox"/> Other (Describe):
b. Does this system/project relate solely to an infrastructure?	<input type="radio"/> Yes <input checked="" type="radio"/> No	If yes, how many applications currently reside on infrastructure?

	Response	Comments
<p>c. Does/Will the system contain (store) information in identifiable form (IIF) within any database(s), record(s), file(s) or Web site(s) hosted by this system? If yes, check all that apply in the Comments column. If the category of personal information is not listed, please check Other and identify the category.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>	<p><input checked="" type="checkbox"/> Name</p> <p><input checked="" type="checkbox"/> Date of birth</p> <p><input type="checkbox"/> Social Security Number (or other number originated by a government that specifically identifies an individual)</p> <p><input checked="" type="checkbox"/> Photographic identifiers (e.g., photograph image, x-rays, and video)</p> <p><input type="checkbox"/> Driver license</p> <p><input type="checkbox"/> Biometric identifiers (e.g., fingerprint and voiceprint)</p> <p><input type="checkbox"/> Mother maiden name</p> <p><input type="checkbox"/> Vehicle identifiers (e.g., license plates)</p> <p><input checked="" type="checkbox"/> Mailing address</p> <p><input checked="" type="checkbox"/> Phone numbers (e.g., phone, fax, and cell)</p> <p><input type="checkbox"/> Medical records numbers</p> <p><input checked="" type="checkbox"/> Medical notes</p> <p><input type="checkbox"/> Financial account information and/or numbers (e.g., checking account number and Personal Identification Numbers [PIN])</p> <p><input checked="" type="checkbox"/> Certificates (e.g., birth, death, and marriage)</p> <p><input checked="" type="checkbox"/> Legal documents or notes (e.g., divorce decree, criminal records, or other)</p> <p><input type="checkbox"/> Device identifiers (e.g., pacemaker, hearing aid, or other)</p> <p><input type="checkbox"/> Web Uniform Resource Locators (URL)</p> <p><input checked="" type="checkbox"/> E-mail address</p> <p><input checked="" type="checkbox"/> Education records</p> <p><input type="checkbox"/> Military status and/or records</p> <p><input type="checkbox"/> Employment status and/or records</p> <p><input type="checkbox"/> Foreign activities and/or interests</p> <p><input type="checkbox"/> Other (Describe):</p>

	Response	Comments
d. Indicate all the categories of individuals about whom IIF is or will be collected.	<input type="radio"/> NA	Categories of individuals: <input type="checkbox"/> Government Employees <input type="checkbox"/> NASA Contractors <input checked="" type="checkbox"/> Members of the public (excluding contractors and partners) <input type="checkbox"/> Business Partners/Contacts, Grantees (including, but not limited to federal, state, local agencies) <input type="checkbox"/> Contractors/Vendors/Suppliers <input type="checkbox"/> Other:
e. Are/Will Records on 10 or more members of the public containing IIF [be] collected, maintained (stored), or disseminated by this system?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	
Section 3 - Records Management Assessment		
a. Does/Will the system contain Federal records?	<input checked="" type="radio"/> Yes <input type="radio"/> No	
b. If the system contains/will contain Federal records, which disposition authority applies?	<input checked="" type="radio"/> NRRS <input type="radio"/> GRS <input type="radio"/> Unknown or not currently scheduled <input type="radio"/> NA	Retention Schedule: 10EDUC
c. Are the records in this system (or will they be) generated in the process of NASA program/project formulation, design, development, or operation as described in NPR 7120?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA	
d. Are the records Vital records for the organization?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA	
Section 4 - Paperwork Reduction Act Assessment		
a. Does/will the system collect information in a standard way (forms, web enabled forms, surveys, questionnaires, etc) from members of the public (including contractors), regardless of format (paper, electronic or oral)?	<input checked="" type="radio"/> Yes <input type="radio"/> No	If yes, indicate format of collection: <input type="checkbox"/> Paper <input checked="" type="checkbox"/> Electronic <input type="checkbox"/> Oral

	Response	Comments
b. Is the information collection indicated above authorized by an OMB Approval Number under the Paperwork Reduction Act (PRA)? If yes, please provide PRA Approval Number under Comments.	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	<input type="checkbox"/> PRA OMB Approval Number: <input checked="" type="checkbox"/> Applied for <input type="checkbox"/> Unknown/Other
Section 5 - Privacy Act Requirements Assessment		
a. Are records (or will records) on individuals be routinely retrieved from the system by using name or a unique identifier?	<input checked="" type="radio"/> Yes <input type="radio"/> No	<p>If yes, indicate data elements used to retrieve record:</p> <input checked="" type="checkbox"/> Name <input type="checkbox"/> Date of birth <input type="checkbox"/> Social Security Number (or other number originated by a government that specifically identifies an individual) <input type="checkbox"/> Photographic identifiers (e.g., photograph image, x-rays, and video) <input type="checkbox"/> Driver license <input type="checkbox"/> Biometric identifiers (e.g., fingerprint and voiceprint) <input type="checkbox"/> Mother maiden name <input type="checkbox"/> Vehicle identifiers (e.g., license plates) <input checked="" type="checkbox"/> Mailing address <input type="checkbox"/> Phone numbers (e.g., phone, fax, and cell) <input type="checkbox"/> Medical records numbers <input type="checkbox"/> Medical notes <input type="checkbox"/> Financial account information and/or numbers (e.g., checking account number and Personal Identification Numbers [PIN]) <input type="checkbox"/> Certificates (e.g., birth, death, and marriage) <input type="checkbox"/> Legal documents or notes (e.g., divorce decree, criminal records, or other) <input type="checkbox"/> Device identifiers (e.g., pacemaker, hearing aid, or other) <input type="checkbox"/> Web Uniform Resource Locators (URL) <input checked="" type="checkbox"/> E-mail address <input type="checkbox"/> Education records <input type="checkbox"/> Military status and/or records <input type="checkbox"/> Employment status and/or records <input type="checkbox"/> Foreign activities and/or interests <input type="checkbox"/> Other (Describe):

	Response	Comments
b. Has a Privacy Act System of Records Notice (SORN) been published in the Federal Register for this system? If no, choose the reason of why not or specify other reason in the Comments column.	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	<input type="checkbox"/> IIF is in the system, but records are not retrieved by individual identifier. <input type="checkbox"/> Should have published an SORN, but was unaware of the requirement. <input type="checkbox"/> System is required to have an SORN but is not yet procured or operational. <input type="checkbox"/> Other (Describe):
c. If a SORN has been published, have major changes to the system occurred since publication of the SORN?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA	
Section 6 - Information Sharing Practices		
Note: If yes, specify resource(s) and purpose for each instance in the Comments column.		
a. Is the IIF in the system voluntarily submitted (or will it be)?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	
b. Does/Will the system collect IIF directly from individuals?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	
c. Does/Will the system collect IIF from other resources (i.e., databases, Web sites, etc.)?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA	
d. Does/Will the system populate data for other resources (i.e., do databases, Web sites, or other resources rely on this system's data)?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA	Resource and Purpose: 1 2 3 4 Other
e. Does/Will the system share or disclose IIF with agencies external to NASA, or other people or organizations outside NASA?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA	With whom and for what purpose: 1 2 3 4 Other

	Response	Comments
f. If the IIF in the system is or will be matched against IIF in one or more other computer systems internal or external to NASA, are (or will there be) computer data matching agreement(s) in place?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA	Location of other systems involved in matching: <input type="checkbox"/> Internal to NASA <input type="checkbox"/> External to NASA Other systems involved in matching:
g. Will the IIF be de-identified, aggregated, or otherwise made anonymous?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA	<input type="checkbox"/> De-identified <input type="checkbox"/> Aggregated <input type="checkbox"/> Anonymous
h. Is there a process, either planned or in place, to notify organizations or systems that are dependent upon the IIF contained in this system when changes occur (i.e., revisions to IIF, when the system encounters a major change, or is replaced)?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA	
i. Is there a process, either planned or in place, to notify and obtain consent from the individuals whose IIF is in the system when major changes occur to the system (e.g., disclosure and/or data uses have changed since the notice at the time of the original collection)?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	
j. Is there (or will there be) a process in place for individuals to choose how their IIF is used?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA	Process:
k. Is there (or will there be) a complaint process in place for individuals who believe that their IIF has been inappropriately obtained, used, or disclosed, or that the IIF is inaccurate?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	
l. Are there (or will there be) processes in place for periodic reviews of IIF contained in the system to ensure the data's integrity, availability, accuracy, and relevance?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	

	Response	Comments
m. Are there (or will there be) rules of conduct in place for access to IIF on the system?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	<input type="checkbox"/> Users <input checked="" type="checkbox"/> Administrators <input checked="" type="checkbox"/> Developers <input type="checkbox"/> Contractors For what purpose: 1 Administrators manage program 2 Developers manage database 3 4 Other
n. Is there (or will there be) a process in place to log routine and non-routine disclosures and/or unauthorized access?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	Disclosures logged (check all apply): <input checked="" type="checkbox"/> Routine <input checked="" type="checkbox"/> Non-routine <input type="checkbox"/> Public Internet (Describe):
Section 7 - Web Site Hosting Practices Note: If yes, identify what type of site the system hosts in the Comments column. If no or n/a, skip this section and start with next section.		
a. Does/Will the system have a Web interface?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	Type of site (check all apply): <input checked="" type="checkbox"/> Public Internet (Describe): null <input type="checkbox"/> Internal NASA (Describe):
b. Is the Web site (or will it be) accessible by the public or other entities (i.e., federal, state, and local agencies, contractors, third-party administrators, etc.)?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	1 public 2 3 4
c. Is the Agency Web site privacy policy statement posted (or will it be posted) on the Web site?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	
d. Is the Web site's privacy policy in machine-readable format, such as Platform for Privacy Preferences (P3P)?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	Implementation Plan:

	Response	Comments
e. Does/Will the Web site employ persistent tracking technologies?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA	<input type="checkbox"/> Session cookies <input type="checkbox"/> Persistent cookies <input type="checkbox"/> Web bugs <input type="checkbox"/> Web beacons <input type="checkbox"/> Other (Describe): Authorizing Official: Authorizing Date:
f. Does/Will the Web site collect or maintain personal information from or about children under the age of 13?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA	
g. Does/Will the Web site collect or maintain personal information from or about children under the age of 13, please indicate how the information is collected?	<input checked="" type="radio"/> NA	What Information is collected: How the information is collected (check all apply): <input type="checkbox"/> Actively directly from the child <input type="checkbox"/> Passively through cookies
h. If the Web site does/will collect or maintain personal information from or about children under the age of 13, is the information shared with any non-NASA organizations, grantees, universities, etc.?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA	Information is shared with:
i. If the Web site does/will collect or maintain personal information from or about children under the age of 13, specify what method is used for obtaining parental consent?	<input checked="" type="radio"/> NA	Method used for obtaining parental consent (check all apply): <input type="checkbox"/> No consent is obtained <input type="checkbox"/> Simple email <input type="checkbox"/> Email accompanied by digital signature <input type="checkbox"/> Signed form from the parent via postal mail or facsimile <input type="checkbox"/> Accepting and verifying a credit card number in connection with a transaction <input type="checkbox"/> Taking calls from parents, through a toll-free telephone number staffed by trained person

	Response	Comments
j. Does/Will the Web site collect IIF electronically from any individuals?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	<input type="checkbox"/> Personal Information <input checked="" type="checkbox"/> Name <input checked="" type="checkbox"/> Date of birth <input type="checkbox"/> Social Security Number (or other number originated by a government that specifically identifies an individual) <input checked="" type="checkbox"/> Photographic identifiers (e.g., photograph image, x-rays, and video) <input type="checkbox"/> Driver license <input type="checkbox"/> Biometric identifiers (e.g., fingerprint and voiceprint) <input type="checkbox"/> Mother maiden name <input type="checkbox"/> Vehicle identifiers (e.g., license plates) <input checked="" type="checkbox"/> Mailing address <input checked="" type="checkbox"/> Phone numbers (e.g., phone, fax, and cell) <input type="checkbox"/> Medical records numbers <input checked="" type="checkbox"/> Medical notes <input type="checkbox"/> Financial account information and/or numbers (e.g., checking account number and Personal Identification Numbers [PIN]) <input checked="" type="checkbox"/> Certificates (e.g., birth, death, and marriage) <input checked="" type="checkbox"/> Legal documents or notes (e.g., divorce decree, criminal records, or other) <input type="checkbox"/> Device identifiers (e.g., pacemaker, hearing aid, or other) <input type="checkbox"/> Web Uniform Resource Locators (URL) <input checked="" type="checkbox"/> E-mail address <input checked="" type="checkbox"/> Education records <input type="checkbox"/> Military status and/or records <input type="checkbox"/> Employment status and/or records <input type="checkbox"/> Foreign activities and/or interests <input type="checkbox"/> Other (Describe):

	Response	Comments
k. Does/Will the Web site provide a PDF form to be completed with IIF from any individuals and then mailed or otherwise provided to NASA?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA	<input type="checkbox"/> Personal Information <input type="checkbox"/> Name <input type="checkbox"/> Date of birth <input type="checkbox"/> Social Security Number (or other number originated by a government that specifically identifies an individual) <input type="checkbox"/> Photographic identifiers (e.g., photograph image, x-rays, and video) <input type="checkbox"/> Driver license <input type="checkbox"/> Biometric identifiers (e.g., fingerprint and voiceprint) <input type="checkbox"/> Mother maiden name <input type="checkbox"/> Vehicle identifiers (e.g., license plates) <input type="checkbox"/> Mailing address <input type="checkbox"/> Phone numbers (e.g., phone, fax, and cell) <input type="checkbox"/> Medical records numbers <input type="checkbox"/> Medical notes <input type="checkbox"/> Financial account information and/or numbers (e.g., checking account number and Personal Identification Numbers [PIN]) <input type="checkbox"/> Certificates (e.g., birth, death, and marriage) <input type="checkbox"/> Legal documents or notes (e.g., divorce decree, criminal records, or other) <input type="checkbox"/> Device identifiers (e.g., pacemaker, hearing aid, or other) <input type="checkbox"/> Web Uniform Resource Locators (URL) <input type="checkbox"/> E-mail address <input type="checkbox"/> Education records <input type="checkbox"/> Military status and/or records <input type="checkbox"/> Employment status and/or records <input type="checkbox"/> Foreign activities and/or interests <input type="checkbox"/> Other (Describe):
l. Does/Will the Web site share IIF with other organizations within NASA, agencies external to NASA, or other people or organizations outside NASA?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA	With whom Information is shared: 1 2 Other

	Response	Comments
m. Are rules of conduct in place (or will they be in place) for access to IIF on the Web site?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	<input type="checkbox"/> Users <input checked="" type="checkbox"/> Administrators <input checked="" type="checkbox"/> Developers <input type="checkbox"/> Contractors For what purpose: 1 Administrators manage program 2 Developers manage data 3 Contractors same as Developers 4 Other
n. Does/Will the Web site contain links to sites external to the Center that owns and/or operates the system?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	<input checked="" type="checkbox"/> Disclaimer notice for all external links
Section 8 - Administrative Controls Note: If yes, enter the CA (Authorization to Operate (ATO)) date in the comments column. If no or the system is under development and not yet authorized to operate the time of this PIA, please enter a planned CA timeline in the comments column.		
a. Has the system been certified and accredited (authorized to operate): 'y' or 'n'?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA	CA Plan/Timeline:
b. Have personnel (system owners, managers, operators, contractors and/or program managers) using the system been (or will they be) trained and made aware of their responsibilities for protecting the IIF being collected and maintained?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	
c. Who has/will have access to the IIF on the system?		Check all that apply <input type="checkbox"/> Users <input checked="" type="checkbox"/> Administrators <input checked="" type="checkbox"/> Developers <input checked="" type="checkbox"/> Contractors <input type="checkbox"/> Others
d. If contractors operate or use the system, do the contracts include clauses ensuring adherence to privacy provisions and practices?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	

	Response	Comments
e. Are methods in place to ensure that access to IIF is restricted to only those required to perform their official duties?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	Method(s): Access not given to individuals who do not need it.
f. Are there policies or guidelines in place for the retention and destruction of IIF within the application/system?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	Policies/Practices:
Section 9 - Technical Controls		
a. Are technical controls in place to minimize the possibility of unauthorized access, use, or dissemination of the data in the system (or will there be)?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	
b. Are any of the password controls listed in the Comments column in place (or will there be)?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	Check all that apply: <input type="checkbox"/> Passwords expire after a set period of time. <input type="checkbox"/> Accounts are locked after a set period of inactivity. <input checked="" type="checkbox"/> Minimum length of passwords is eight characters. <input type="checkbox"/> Passwords must be a combination of uppercase, lowercase, and special characters. <input type="checkbox"/> Accounts are locked after a set number of incorrect attempts.
c. Is there (or will there be) a process in place to monitor and respond to privacy and/or security incidents?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	
Section 10 - Physical Controls		
a. Are physical access controls in place (or will they be)?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	

Privacy Impact Assessment (PIA) Summary

Date of this Submission: Jan 27, 2011

NASA Center: JSC

System Name: JSC AD - Women in STEM High School Aerospace Scholars - <http://TBD>

Is this application or information collection new or is an existing one being modified? Not New

Does this application collect, maintain, and/or disseminate information in identifiable form (IIF)? Yes

Mission Program/Project Supported: Education Office/WISH

Identifying Numbers (Use N/A, where appropriate)

Privacy Act System of Records Number: N/A

OMB Information Collection Approval Number and Expiration Date: N/A

Other Identifying Number(s): N/A

Description

1. Provide an overview of the application or collection and indicate the legislation authorizing this activity:

This system distributes information to participants of a NASA administered project. The system collects information on applicants, and handles homework assignments that are submitted by participants.

2. Describe the information the agency will collect, maintain, or disseminate and how the agency will use the information. In this description, indicate whether the information contains IIF and whether submission is voluntary or mandatory:

The system collects and uses the following information: Student Names (IIF # Optional) # used to identify the students throughout the program and to arrange for travel. Failure to provide data may impair a student's ability to qualify for enrollment in the educational program. Date of Birth (IIF # Optional) # used to verify that students are eligible to participate in the program. Failure to provide data may impair a student's ability to qualify for enrollment in the educational program. Mailing Address (IIF # Optional) # used to send program related documents to the students, arrange travel, and log the legislative districts that are being serviced by the program. Failure to provide data may impair a student's ability to qualify for enrollment in the educational program. Phone Numbers (IIF # Optional) # used to follow-up on student assignments, travel information, and as an emergency contact number when the students are on-site during the summer. Failure to provide data may impair a student's ability to qualify for enrollment in the educational program. E-mail Address (IIF # Optional) # used as the primary form of contact during the school-year when students are participating remotely. Failure to provide data may impair a student's ability to qualify for enrollment in the educational program. Education Records (IIF # Optional) # used to ensure that the students are academically eligible to participate in the program. Failure to provide data may impair a student's ability to qualify for enrollment in the educational program.

3. Explain how the IIF is collected, maintained, and/or disseminated is the minimum necessary to accomplish the purpose for this effort:

All of the collected information stated above is necessary for the successful administration of this program.

4. Explain why the IIF is being collected, maintained, or disseminated:

Explained in Question number 2

5. Identify with whom the agency will share the IIF:

The agency shares no IIF with anyone outside of the agency with the exception of sharing with U.S. Senators and Representatives the constituents' names and cities. Additionally summaries of information, such as #state districts represented# may be published but do not contain personal information regarding the students.

6. Describe how the IIF will be obtained, from whom it will be collected, what the suppliers of the information and the subjects will be told about the information collection, and how this message will be conveyed to them (e.g. written notice, electronic notice if a Web-based collection). Describe any opportunities for consent provided to individuals regarding what information is collected and how the information will be shared:

The IIF is obtained through online forms from high school juniors. The suppliers of the information are notified of the JSC Web Accessibility and Policy Notices through a link at the bottom of each Webpage. Suppliers of information are notified electronically at the time that they are inputting information.

7. State whether the personal information will be collected from children under age 13 on the Internet and, if so, how parental or guardian approval will be obtained. (Reference: Children's Online Privacy Protection Act of 1998):

No information is collected from children under the age of 13.

8. Describe how the IIF will be secured:

All access to IIF is behind a password protected SSL location. Backup drives of the IIF are stored offline behind physical security devices.

9. Describe plans for retention and destruction on IIF:

All electronic IIF is stored in the same secure manner for a period of at least five years. Once the data has been deemed unnecessary to maintain, it will be deleted. Retention Schedule: Schedule 1 Item 32 Sub-Item A

10. Identify whether a system of records is being created under section 552a of Title 5, United States Code (the Privacy Act), or identify the existing Privacy Act system of records notice under which the records will be maintained:

The system is covered under 10EDUC. The following decisions resulted from conducting the PIA: #1. IIF access rules of conduct will be established.

Point of contact to whom a member of the public can address questions concerning this information system and the privacy concerns associated with it:

Concur:

Concur:

Concurrence Credentials on File _____

Concurrence Credentials on File _____

LINDA KAY. SMITH
System Owner

JOREEN YU. LEE
Center Privacy Manager

Date:

Date:

Concur:

Approve:

Concurrence Credentials on File _____

BRYAN D. MCCALL
NASA Privacy Program Manager

LINDA Y. CURETON
NASA CIO

Date:

Date _____

Document History

Date	Action	Message
10/25/10	Delegated to:LINDA SMITH	Please revise. Thanks.
10/22/10	Delegated to:JOREEN LEE	Furhter changes based on review.