

## PRIVACY IMPACT ASSESSMENT (PIA)

**PRESCRIBING AUTHORITY:** DoD Instruction 5400.16, "DoD Privacy Impact Assessment (PIA) Guidance". Complete this form for Department of Defense (DoD) information systems or electronic collections of information (referred to as an "electronic collection" for the purpose of this form) that collect, maintain, use, and/or disseminate personally identifiable information (PII) about members of the public, Federal employees, contractors, or foreign nationals employed at U.S. military facilities internationally. In the case where no PII is collected, the PIA will serve as a conclusive determination that privacy requirements do not apply to system.

**1. DOD INFORMATION SYSTEM/ELECTRONIC COLLECTION NAME:**

Fingerprint Transaction System (FTS)

**2. DOD COMPONENT NAME:**

DoD Business Enterprise

**3. PIA APPROVAL DATE:**

DCSA

### SECTION 1: PII DESCRIPTION SUMMARY (FOR PUBLIC RELEASE)

**a. The PII is:** (Check one. Note: foreign nationals are included in general public.)

- |  |  |
|--|--|
| <input type="checkbox"/> From members of the general public  | <input type="checkbox"/> From Federal employees and/or Federal contractors |
| <input checked="" type="checkbox"/> From both members of the general public and Federal employees and/or Federal contractors | <input type="checkbox"/> Not Collected (if checked proceed to Section 4)   |

**b. The PII is in a:** (Check one)

- |  |   |
|--|---|
| <input type="checkbox"/> New DoD Information System                    | <input type="checkbox"/> New Electronic Collection      |
| <input checked="" type="checkbox"/> Existing DoD Information System    | <input type="checkbox"/> Existing Electronic Collection |
| <input type="checkbox"/> Significantly Modified DoD Information System |   |

**c. Describe the purpose of this DoD information system or electronic collection and describe the types of personal information about individuals collected in the system.**

The Fingerprint Transaction System (FTS), the subject of this PIA, handles fingerprint checks for the Federal background investigations. FTS provides federal agencies the ability to submit fingerprint images electronically through DCSA to the Criminal Justice Information Services (CJIS) Division of the Federal Bureau of Investigations (FBI). The Card Scan Center (CSC) receives and converts fingerprint hard cards into FBI's Electronic Fingerprint Transmissions Specification (EFTS) before transmission to CJIS. FTS utilizes a dedicated T-1 secure connection called the CJIS WAN; this connection sends and receives updated fingerprint results obtained by the FBI-CJIS Integrated Automated Fingerprint Identification System (IAFIS). The search results of the fingerprint images are sent back to FTS and are provided to other DCSA systems that contribute to the overall investigative process. The investigative data associated with those fingerprints is also stored in the Personal Investigation Processing System (PIPS) database

**d. Why is the PII collected and/or what is the intended use of the PII?** (e.g., verification, identification, authentication, data matching, mission-related use, administrative use)

Mission-related use/identification

**e. Do individuals have the opportunity to object to the collection of their PII?**  Yes  No

(1) If "Yes," describe the method by which individuals can object to the collection of PII.

(2) If "No," state the reason why individuals cannot object to the collection of PII.

Individuals are informed by the Privacy Act statement that submission of the information is voluntary, however, failure to provide their information will not permit the agency to complete the background investigation.

**f. Do individuals have the opportunity to consent to the specific uses of their PII?**  Yes  No

(1) If "Yes," describe the method by which individuals can give or withhold their consent.

(2) If "No," state the reason why individuals cannot give or withhold their consent.

FTS is a DCSA internal system not accessible by the public and/or individuals, therefore, notice is not given by the system. However, subjects of investigation are provided notice and the ability to consent, in the form of a Privacy Act statement on the SF-87 or the FD-258, at the original point of the information collection. Notice is also given in the DUSDI 02-DOD SORN and in this PIA.

**g. When an individual is asked to provide PII, a Privacy Act Statement (PAS) and/or a Privacy Advisory must be provided.** (Check as appropriate and provide the actual wording.)

- Privacy Act Statement       Privacy Advisory       Not Applicable

The Privacy Act Statement informs the individual on the uses of the information. While that statement does not explain the system

specifically, it does provide information concerning how their information will be used.

**h. With whom will the PII be shared through data exchange, both within your DoD Component and outside your Component? (Check all that apply)**

- |  |          |  |
|--|----------|--|
| <input checked="" type="checkbox"/> Within the DoD Component   | Specify. |  |
| <input type="checkbox"/> Other DoD Components  | Specify. |  |
| <input checked="" type="checkbox"/> Other Federal Agencies   | Specify. | FTS shares records and information with the FBI for the purpose of obtaining criminal history record information. This information is transmitted through a secure connection. |
| <input type="checkbox"/> State and Local Agencies  | Specify. |  |
| <input type="checkbox"/> Contractor (Name of contractor and describe the language in the contract that safeguards PII. Include whether FAR privacy clauses, i.e., 52.224-1, Privacy Act Notification, 52.224-2, Privacy Act, and FAR 39.105 are included in the contract.) | Specify. |  |
| <input type="checkbox"/> Other (e.g., commercial providers, colleges).   | Specify. |  |

**i. Source of the PII collected is: (Check all that apply and list all information systems if applicable)**

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Individuals            | <input type="checkbox"/> Databases          |
| <input type="checkbox"/> Existing DoD Information Systems  | <input type="checkbox"/> Commercial Systems |
| <input type="checkbox"/> Other Federal Information Systems |   |

Applicants provide information in support of their own personal background investigation, which is a prerequisite for federal employment. Live scanners are used to collect and digitize an applicant's fingerprints with their PII. These digitized fingerprints, along with the PII for certain types of fingerprint submissions, are submitted to and stored within FTS. In addition to applicant data submitted electronically to FTS, information from two other systems is used and stored within FTS: 1) Existing PII information and system responses associated with an applicant in PIPS that is sent to or requested by FTS and 2) Criminal history records, non-ident, and error responses from the FBI-CJIS.

**j. How will the information be collected? (Check all that apply and list all Official Form Numbers if applicable)**

- |   |   |
|---|---|
| <input type="checkbox"/> E-mail   | <input checked="" type="checkbox"/> Official Form (Enter Form Number(s) in the box below) |
| <input type="checkbox"/> Face-to-Face Contact                                     | <input type="checkbox"/> Paper  |
| <input type="checkbox"/> Fax  | <input type="checkbox"/> Telephone Interview  |
| <input checked="" type="checkbox"/> Information Sharing - System to System        | <input type="checkbox"/> Website/E-Form   |
| <input type="checkbox"/> Other (If Other, enter the information in the box below) |   |

SF87 and FD258 forms.

**k. Does this DoD Information system or electronic collection require a Privacy Act System of Records Notice (SORN)?**

A Privacy Act SORN is required if the information system or electronic collection contains information about U.S. citizens or lawful permanent U.S. residents that is retrieved by name or other unique identifier. PIA and Privacy Act SORN information must be consistent.

- Yes  No

If "Yes," enter SORN System Identifier **DUSDI 02-DOD Personnel Vetting Recor**

SORN Identifier, not the Federal Register (FR) Citation. Consult the DoD Component Privacy Office for additional information or <http://dpcltd.defense.gov/Privacy/SORNs/>  
or

If a SORN has not yet been published in the Federal Register, enter date of submission for approval to Defense Privacy, Civil Liberties, and Transparency Division (DPCLTD). Consult the DoD Component Privacy Office for this date

If "No," explain why the SORN is not required in accordance with DoD Regulation 5400.11-R: Department of Defense Privacy Program.

**l. What is the National Archives and Records Administration (NARA) approved, pending or general records schedule (GRS) disposition authority for the system or for the records maintained in the system?**

(1) NARA Job Number or General Records Schedule Authority. **DAA-0478-2012-0003**



**SECTION 2: PII RISK REVIEW**

**a. What PII will be collected** (a data element alone or in combination that can uniquely identify an individual)? (Check all that apply)

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Biometrics     | <input checked="" type="checkbox"/> Birth Date                            | <input type="checkbox"/> Child Information   |
| <input type="checkbox"/> Citizenship               | <input type="checkbox"/> Disability Information                           | <input type="checkbox"/> DoD ID Number   |
| <input type="checkbox"/> Driver's License          | <input type="checkbox"/> Education Information                            | <input type="checkbox"/> Emergency Contact   |
| <input type="checkbox"/> Employment Information    | <input type="checkbox"/> Financial Information                            | <input checked="" type="checkbox"/> Gender/Gender Identification                       |
| <input type="checkbox"/> Home/Cell Phone           | <input type="checkbox"/> Law Enforcement Information                      | <input type="checkbox"/> Legal Status  |
| <input type="checkbox"/> Mailing/Home Address      | <input type="checkbox"/> Marital Status                                   | <input type="checkbox"/> Medical Information   |
| <input type="checkbox"/> Military Records          | <input type="checkbox"/> Mother's Middle/Maiden Name                      | <input type="checkbox"/> Name(s)   |
| <input type="checkbox"/> Official Duty Address     | <input type="checkbox"/> Official Duty Telephone Phone                    | <input type="checkbox"/> Other ID Number   |
| <input type="checkbox"/> Passport Information      | <input type="checkbox"/> Personal E-mail Address                          | <input type="checkbox"/> Photo   |
| <input checked="" type="checkbox"/> Place of Birth | <input type="checkbox"/> Position/Title                                   | <input type="checkbox"/> Protected Health Information (PHI) <sup>1</sup>               |
| <input checked="" type="checkbox"/> Race/Ethnicity | <input type="checkbox"/> Rank/Grade                                       | <input type="checkbox"/> Religious Preference  |
| <input type="checkbox"/> Records                   | <input type="checkbox"/> Security Information                             | <input checked="" type="checkbox"/> Social Security Number (SSN) (Full or in any form) |
| <input type="checkbox"/> Work E-mail Address       | <input type="checkbox"/> If Other, enter the information in the box below |  |

name, AKA, Social Security, number, date of birth, place of birth, hair color, eye color, weight, height, sex and race.

If the SSN is collected, complete the following questions.

*(DoD Instruction 1000.30 states that all DoD personnel shall reduce or eliminate the use of SSNs wherever possible. SSNs shall not be used in spreadsheets, hard copy lists, electronic reports, or collected in surveys unless they meet one or more of the acceptable use criteria.)*

(1) Is there a current (dated within two (2) years) DPCLTD approved SSN Justification on Memo in place?

- Yes  No

If "Yes," provide the signatory and date approval. If "No," explain why there is no SSN Justification Memo.

PIA provides the justification

(2) Describe the approved acceptable use in accordance with DoD Instruction 1000.30 "Reduction of Social Security Number (SSN) Use within DoD".

(3) Describe the mitigation efforts to reduce the use including visibility and printing of SSN in accordance with DoD Instruction 1000.30, "Reduction of Social Security Number (SSN) Use within DoD".

(4) Has a plan to eliminate the use of the SSN or mitigate its use and or visibility been identified in the approved SSN Justification request?

If "Yes," provide the unique identifier and when can it be eliminated?

If "No," explain.

- Yes  No

**b. What is the PII confidentiality impact level<sup>2</sup>?**  Low  Moderate  High

<sup>1</sup>The definition of PHI involves evaluating conditions listed in the HIPAA. Consult with General Counsel to make this determination.

<sup>2</sup>Guidance on determining the PII confidentiality impact level, see Section 2.5 "Categorization of PII Using NIST SP 800-122." Use the identified PII confidentiality impact level to apply the appropriate Privacy Overlay low, moderate, or high. This activity may be conducted as part of the categorization exercise that occurs under the Risk Management Framework (RMF). Note that categorization under the RMF is typically conducted using the information types described in NIST Special Publication (SP) 800-60, which are not as granular as the PII data elements listed in the PIA table. Determining the PII confidentiality impact level is most effective when done in collaboration with the Information Owner, Information System Owner, Information System Security Manager, and representatives from the security and privacy organizations, such as the Information System Security Officer (ISSO) and Senior Component Official for Privacy (SCOP) or designees.

**c. How will the PII be secured?**

(1) Physical Controls. (Check all that apply)

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Cipher Locks    | <input type="checkbox"/> Closed Circuit TV (CCTV)                         |
| <input type="checkbox"/> Combination Locks          | <input checked="" type="checkbox"/> Identification Badges                 |
| <input checked="" type="checkbox"/> Key Cards       | <input type="checkbox"/> Safes  |
| <input checked="" type="checkbox"/> Security Guards | <input type="checkbox"/> If Other, enter the information in the box below |

(2) Administrative Controls. (Check all that apply)

- Backups Secured Off-site
- Encryption of Backups
- Methods to Ensure Only Authorized Personnel Access to PII
- Periodic Security Audits
- Regular Monitoring of Users' Security Practices
- If Other, enter the information in the box below

(3) Technical Controls. (Check all that apply)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Biometrics                            | <input type="checkbox"/> Common Access Card (CAC)                         | <input type="checkbox"/> DoD Public Key Infrastructure Certificates  |
| <input checked="" type="checkbox"/> Encryption of Data at Rest | <input checked="" type="checkbox"/> Encryption of Data in Transit         | <input type="checkbox"/> External Certificate Authority Certificates |
| <input checked="" type="checkbox"/> Firewall                   | <input type="checkbox"/> Intrusion Detection System (IDS)                 | <input type="checkbox"/> Least Privilege Access                      |
| <input type="checkbox"/> Role-Based Access Controls            | <input type="checkbox"/> Used Only for Privileged (Elevated Roles)        | <input type="checkbox"/> User Identification and Password            |
| <input type="checkbox"/> Virtual Private Network (VPN)         | <input type="checkbox"/> If Other, enter the information in the box below |  |

**d. What additional measures/safeguards have been put in place to address privacy risks for this information system or electronic collection?**