



## PEER ASSESSMENT FORM

OMB CONTROL NUMBER:

OMB EXPIRATION DATE:

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The public reporting burden for this collection of information, \_\_\_\_\_, is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at [whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil](mailto:whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.



## PEER ASSESSMENT FORM

Name:

Role with the Company:

Company and CAGE:

Name of Person Assessing:

Person's Role with the Company:

1. Which areas of expertise did the Company expect the Subject to leverage during this assessment period?

national security      information security      personnel security      industrial security  
finance      business development      cybersecurity      network operations      acquisition  
business operations      technology      other

2. How would you characterize the Subject's overall effectiveness this assessment cycle?

3. How would you characterize the Subject's understanding of the risks to the critical technologies, assets, and information necessary for the Company to effectively perform?

4. How would you characterize the Subject's professional relationships with the following groups or individuals?

Signature:

Date:

E-mail:

Phone: