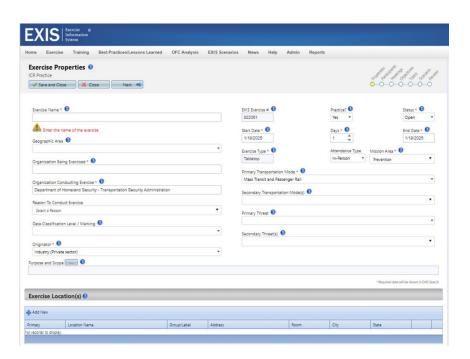
# EXIS

Screenshots

Online Exercises & Survey



# EXERCISE PROPERTIES





### Register for Your EXIS Account

First Name	Last Name
Country	Preferred Transportation Sector
Limited States	-
Your Employer	
I work for a Government Agency:	I work for Private Industry:
O Federal	Transportation Owner or Operator
G State	☐ Emergency Management
G Local	☐ Consultant
Law Enforcement	☐ Other - Specify
Your Professional Information	
Job Title	State
City	7lo Codo
City	Zip Code
Work Phone Extension	on Mobile Phone (optional)
+1	+1
Work Email	Confirm Work Email
Alternate Email (optional)	
Alternate Ernall (optionall)  Reason for Nixeding an EXIS Account	
Reason for Needing an EOS Account **  Your Login	
Reason for Needing an BOS Account	
Reason for Needing an EOS Account **  Your Login	
Reason for Nixeding an DOS Account   Your Login Choose a Username	
Reason for Needing an DOS Account   Your Login Choose a Username  Cheeke a Password	Briter your Response to Question #1

### EXIS REGISTRATION

Participant Feedback Form
ICR Practice
Monday, October 21, 2024

ercise was well-structured and organized.

ercise scenario was plausible and realistic.

pation in the exercise was appropriate for someone in my position.

ants included the right people in terms of level and mix of disciplines

ercise afforded me the opportunity to network with federal, state, local, t stakeholders with whom I did not previously have established relationship

ercise was relevant to the risks facing my organization.

zercise was valuable to myself and/or my organization.

sly Agree

sly Disagree

/ Agree

ly Disagree

ply Disagree

ply Agree y Agree

### 

### PARTICIPANT FEEDBACK FORM

Privacy Act Statement:

AUTHORITY: 49 USC § 114(f)(15); 6 USC §§ 1136(a), 1167, and 1183.

PRINCIPAL PURPOSE(S): This information will be used to grant individuals access to EXIS. ROUTINE USE(S): This information may be shared in accordance with the Privacy Act of 1974, 5 USC § 552(a), for routine uses identified in the DHS system of records, DHS/ALL-004 General Information Technology Access Account Records System and DHS/ALL 002 DHS Mailing and Other Lists System, or as further described in the Privacy Impact Assessment, DHS/ALL/PIA-006 DHS General Contact Lists and subsequent updates, available at <a href="https://www.dhs.gov/privacy">www.dhs.gov/privacy</a>. DISCLOSURE: Furnishing this information is voluntary; however, failure to provide the requested information will prevent TSA from being able to grant an individual's access request to EXIS.

## PRIVACY ACT STATEMENT

### PAPERWORK REDUCTION ACT BURDEN

▶This collection of information is voluntary pursuant to Implementing Recommendations of the 9/11 Commission Act of 2007. It is estimated that the time to design and conduct an exercise is approximately 3.5 hours and the time to complete the survey is 0.25 hours. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The OMB control number assigned to this collection is 1652-0057, which expires 03/31/2025. Send comments regarding this burden estimate or any other aspect of this collection of information including suggestions for reducing this burden to TSA PRA Officer, 6595 Springfield Center Drive, Springfield, VA 20598-6011. ATTN: PRA 1652-0057.