

Memorandum To: Chief Information Officer,
El Paso Community College
Administrative Service Center

Subject: **Completion of Business Continuity Planning (BCP)
Annual Testing**

Department/Program Name:
Location:

Owner of Information Resource:
Owner's Phone:

I, the undersigned responsible authority verify that (Department/Program name) of El Paso Community College has a current and operational plan for Business Continuity as required by EPCC Procedure.

Date of most recent review of plan (current academic year):

Location of plan (for review by the EPCC):

Date of most recent exercise (current fiscal year):

Phases exercised during the most recent exercise:
(Indicate all items evaluated and the results)

Signature
Department/Program name