



# Vendor Risk Questionnaire

## Third-Party Security Assessment | IronRoot Risk Consultants

Complete this questionnaire for any vendor with access to your systems, data, or facilities. Responses should be provided in writing. Supporting documentation is welcomed where noted.

### Vendor Information

Vendor / Company Name:	_____	Date Completed:	_____
Primary Contact Name:	_____	Title:	_____
Email:	_____	Phone:	_____
Services Provided:	_____	Contract Start Date:	_____

### Section 1: Security Program & Governance

#	Question	Yes	No	N/A	Notes / Evidence
1	Do you have a written information security policy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Has your security policy been reviewed or updated in the last 12 months?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	Do you conduct formal security risk assessments? If yes, how frequently?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	Do you have a designated security officer or role responsible for information security?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Do you carry cyber liability insurance? If yes, please provide coverage limits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6	Do you have a formal vulnerability management or patch management program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Section 2: Access Controls & Authentication

#	Question	Yes	No	N/A	Notes / Evidence
1	Is multi-factor authentication (MFA) enforced for all employees accessing your systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Do you enforce MFA on all access to systems that process or store our data?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	Do you follow the principle of least privilege when granting access rights?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	Do you have a formal user access review process? If yes, how frequently?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Do you have a documented employee offboarding procedure that includes immediate access revocation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6	Do you use a privileged access management (PAM) solution for administrative accounts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Section 3: Data Protection

#	Question	Yes	No	N/A	Notes / Evidence
1	Do you encrypt data at rest using AES-256 or equivalent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Do you encrypt data in transit using TLS 1.2 or higher?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	Can you describe how you classify and handle sensitive or confidential data?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	Do you have a documented data retention and secure disposal policy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Have you identified all locations where our data may be stored or processed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6	Will you notify us within 72 hours of discovering a breach involving our data?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Section 4: Network Security & Endpoint Protection

#	Question	Yes	No	N/A	Notes / Evidence
1	Do you use endpoint detection and response (EDR) or antivirus on all endpoints?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Do you conduct regular security awareness training for your employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

3	Do you segment your network to isolate sensitive systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	Do you perform regular penetration testing or vulnerability scanning? If yes, how frequently?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Do you have a backup and disaster recovery plan that has been tested?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6	Do you have a written incident response plan? Has it been exercised in the last 12 months?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## Section 5: Subcontractors & Compliance

#	Question	Yes	No	N/A	Notes / Evidence
1	Do you use any subcontractors or sub-processors who may access our data?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Do your subcontractor agreements include data security and confidentiality requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	Have you achieved any security certifications (SOC 2, ISO 27001, PCI DSS)? If yes, please attach.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	Are you subject to any regulatory requirements relevant to the services provided to us?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Do you perform security reviews of your own third-party vendors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## Reviewer Notes

<b>Risk Rating Assigned:</b>	<input type="checkbox"/> Critical <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/> Acceptable
<b>Reviewed By:</b>	_____
<b>Review Date:</b>	_____
<b>Next Review Date:</b>	_____
<b>Key Findings:</b>	
<b>Required Remediation:</b>	