



PSG EXEMPTION REQUEST

Agency:	
Submitted By:	
Phone:	
Email:	
Date Submitted:	
Email To:	gtapsg@gta.ga.gov

Section 1

Complete Section 1 for all Requests

1a. Standard Name / Number for which exemption is requested:

1b. Check Proposed Exemption Period Requested: [] "one year", [] "two year" or [] "three year"

1c. Is there a Project to Implement the Standard in the Agency Strategic Plan? Yes [] No [] If "No", explain:

NOTE: If this Request seeks waiver from:

- A Security standard, complete Section 2 below,
- SM-15-009 "Enterprise Managed Services" or SA-13-004 "Requirements To Use Cloud Services", complete Section 3
- Any other standard, complete Section 4 below.

Section 2

If this Request seeks waiver from a "Security" Standard, complete Section 2.

2a. Describe the agency's proposed actions that require an exemption to the standard:

2b. Describe how the agency could *comply* with this Standard and the *COST* impact to do so:

2c. Justification for the proposed exemption:

i. Describe any legal, funding, operational and/or other constraints:

ii. Describe the proposed scope and extent of exemption:

iii. Business justification:

2d. Describe the *compensating controls* which will be implemented to mitigate the risks that implementing this standard would have addressed and the *COSTS* to do so?

2e. Provide other relevant information:

2f. Provide the contact information for your Agency Information Security Officer (or the person providing the information shown in 2d).

Name:

Phone:

Email:

Section 3

If this Request seeks waiver from SM-15-009 "Enterprise Managed Services"
or SA-13-004 "Requirements to Use Cloud Services" Complete Section 3

3a. Describe the agency *project* that requires an exemption from SM-15-009? (Specifically, *include Name of the service, application, or system; its function and its intended use by the agency. Identify if this is a new activity for the agency, or identify what will be replaced by the project. Identify the hosting entity, the entity that provides the service (developer) and supports the service (maintains, provides trouble support, etc.), and the location at which the service will be hosted.*)

Is the request submitted on behalf of or by a *GETS Full-Service Agency*?

If YES - **All *GETS Full-Service Agencies* must submit a RG/SSR and receive a GETS cost proposal prior to submitting an exemption request. Please provide the SSR#, an explanation and any supporting documentation for the reason why the agency chose not to use the GETS proposal.**

If NO - Go to Question **3b**

3b. Has the agency submitted an PIN to GTA for this project?

If YES - Check here [] Then go to Question **3c**

If NO - **Submit an PIN with this Request** (See SM-08-103). Go to Question **3c**

3c. Has the agency submitted a Business Case to GTA for this project?

If YES - Check here [] Then go to Question **3d**

If NO - Continue here. Provide the following information:

Describe any legal, funding, operational and/or other constraints on this project:

Describe the proposed scope and extent of exemption:

Describe how the proposed solution will enhance services for the agency's clients in ways not possible operating in accordance with the standard:

If data is transferred to or from another state business application, describe how this is now done and how it is intended to be done in the proposed system. If no data is transferred, please confirm.

How are the agency's and the state's needs for data back-up and recovery to be accomplished with the proposed system? Define the needs and proposed processes.

Alternatives Considered:

If No alternatives were investigated, please explain why:

***Required:** Describe below the alternative solutions which have been investigated. Provide the approximate cost and an architectural description of each alternative? Describe the suitability of each alternative for agency business as well as suitability the alternative to run in the enterprise operational environment.

***Required:** All agencies **must also** complete and submit a 'Solution Cost Model Worksheet' with the exemption request (addendum). An exemption request without a completed Cost Model Worksheet will be deemed incomplete: The worksheet can be found at: <https://gta-psg.georgia.gov/request-exemption>

Alternative 1: Describe the enterprise vendor's proposal:

Proposal:

Cost:

	Year 1	Year 2	Year 3	Year 4	Year 5	Totals
Cost Factors						
(add lines as needed)						
Totals						

Alternative 2: Describe a self-developed solution:

Proposal:

Cost:

	Year 1	Year 2	Year 3	Year 4	Year 5	Totals
Cost Factors						
(add lines as needed)						
Totals						

Alternative 3: Describe other solutions:

Proposal:

Cost:

	Year 1	Year 2	Year 3	Year 4	Year 5	Totals
Cost Factors						
(add lines as needed)						
Totals						

Stranded Cost Requirement

***Required:** Describe below any potential stranded cost that would be incurred by your agency and/or the GETS program as a result of approval of this exemption request (i.e. licensing costs).

Description	Stranded Cost \$	Additional Information

Note: Questions 3d through 3f must be provided by the Senior Agency Information Security Officer (SAISO). If your agency has no SAISO, it must be provided by the person with this responsibility.

3d. What is the Security Impact/Categorization assigned to the current and/or future data?

- HIGH
- MODERATE
- LOW

3e. What security attestation has your agency obtained from the proposed provider?

- SOC 2 Audit
- None
- Other _____
specify

3f. Has your Senior Agency Information Security Officer (SAISO) or the person with responsibility for agency IT security compared the security provisions of the proposed provider to the agency's security needs and provided a written opinion that the security, privacy and confidentiality risks remaining are acceptable? Yes No

3g. Provide contact information for your SAISO (or the person providing the information shown in 3d, 3e and 3f).

Name:
Phone:
Email:

3h. Who is the Business Owner for this project?

Name:
Phone:
Email:

3i. Other relevant information: (Name and Operating Location of 1) Development/Support and 2) Operational Host)

Section 4

If this request seeks waiver from any other standard, complete Section 4.

4a. Describe the situation that requires an exemption:

4b. Describe how the agency could implement this Standard and the cost impact to do so:

4c. Justification for the proposed exemption:

i. Describe any legal, funding, operational and/or other constraints:

ii. Describe the proposed scope and extent of exemption:

iii. Describe the business justification:

4d. Other Relevant Information: