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**State of California**  
**California Department of Technology**  
**Office of Information Security**  
**Information Security and**  
**Privacy Program Compliance Certification**  
**SIMM 5330-B**

**October 2023**

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## REVISION HISTORY

REVISION	DATE OF RELEASE	OWNER	SUMMARY OF CHANGES
Initial Release	December 2012	California Office of Information Security	
Minor Update	September 2013	California Information Security Office (CISO)	SIMM number change, change “agency” to “state entity”, and change references to other related SIMM documents.
Minor Update	August 2015	CISO	Changed reference to “remediation plan” to Plan of Action and Milestone (POAM).
Update	January 2018	Office of Information Security (OIS)	Form name change; office name/address change; modified for alignment with Cal-CSIRS online compliance reporting launch; addition of acknowledgment responsibilities; addition of SAFE submission instructions; removal of designee signing authorization; inclusion of Government Code 6254.19.
Minor Update	July 2018	OIS	Corrected “and/or” to “and” in enclosure statement.
Minor Update	March 2019	OIS	Added Confidential Statement.
Minor Update	January 2020	OIS	Added High Risk Findings Report reporting options.
Minor Update	January 2023	OIS	Added separate compliance forms requirement for all state entities.
Minor Update	October 2023	OIS	Confidential and Exempt GC change and Uniform Codes Manual Link updated.

**TO:** Office of Information Security,  
California Department of Technology  
Attn: Security Compliance Reporting  
P.O. Box 1810, Mail Stop Y- 01  
Rancho Cordova, CA 95741

**DATE:** \_\_\_\_\_

**ENTITY NAME:** \_\_\_\_\_

**ORG CODE:** \_\_\_\_\_ (As identified in the [Uniform Codes Manual](#))

Separate compliance forms are required for ALL state entities regardless if they meet the criteria for a Host/Hosted relationship.

**SUBJECT: Information Security and Privacy Program Compliance Certification**

As specified in [Government Code Section 11549.3](#) and [State Administrative Manual \(SAM\) Section 5300.2](#), "the state entity shall comply with the information security and privacy policies, standards and procedures issued by the Office of Information Security (OIS) and ensure compliance with all security and privacy laws, regulations, rules and standards specific to and governing the administration of its programs and ensure implementation of the requisite entity-specific policy, procedures, practices and controls."

As the state entity head or the acting state entity head, I certify:

- I have ensured a standing governance body has been established to direct the development and ongoing maintenance of my entity's information security and privacy programs, and the management of identified risks.
- I meet with and am fully briefed by our entity's standing governance body on the status of the entity's information security and privacy programs compliance, including all entity risks identified through:
  - Information Security Audits,
  - Information Security Assessments,
  - California Compliance and Security Incident Reporting System (Cal-CSIRS) reporting processes,
  - Risk Register & Plan of Action and Milestones (RRPOAM) (SIMM 5305-C) reporting, and
  - Any other enterprise risk assessment or privacy impact assessment processes conducted by or for my entity.
- I have directed the completion of the required Cal-CSIRS information security and privacy program compliance reporting and associated risk response activities for each of our entity's critical information technology systems.

- Our state entity is compliant with SAM Chapter 5300 and that I and other senior management recognize all deficiencies that must be addressed.
- I fully understand the potential impacts of all risk findings not being addressed in an appropriate and timely manner.

Attached as required is our entity's (select one):

- Confidential RRPOAM and Cal-CSIRS confidential High Risk Findings Report; or
- Confidential RRPOAM only, as a Cal-CSIRS confidential High Risk Findings Report was not generated based on our responses.

**For additional information about this submission, please contact:**

Name	Telephone Number	Email

**Signature of the Secretary/Director (or equivalent entity head):**

Name	Signature	Date

**Enclosure(s):** Confidential High Risk Findings Report (if applicable) and RRPOAM

**Securely send this entire form and all enclosures to the OIS using the Secure Automated File Exchange (SAFE) system.**

**Contact OIS for assistance and/or instructions on access to the SAFE system at (916) 445-5239 or at [Security@state.ca.gov](mailto:Security@state.ca.gov).**