

Nomination Form

Email your completed entries to ankur@cioaxis.com

For questions regarding the 'INFOSEC MAESTROS Awards 2017' and Nominations, please call **B D Roy** at **+91-9008815934**.



Section-A Organizational Details

General Information

Full Name		Title	<input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Dr
Designation			
Role in Organization	<input type="checkbox"/> Decision Maker	<input type="checkbox"/> Influencer	<input type="checkbox"/> Evaluator <input type="checkbox"/> User
Organization Name			
Industry Vertical			
Address-1			
Address-2			
City		State	
Mobile	+91-	Phone	+91-
E-mail			

Company Information

Total No of Employees			
Number of PCs / Laptops			
Details of CIO / Head of IT Dept	Name		
	E-mail		
	Mobile		

Section B Details of Information Security at the organization

1. Does your organization have any of the following compliance or certification? (Check ALL that apply)*

- ISO 27001 PCI DSS HIPAA
 SOX IT Act 2008 None
 Others, please specify:

2. Which are the 3 (three) areas you are still facing security challenges and wish to address it within next few months?*

(a) Security Challenge #1 (25 words max)

(b) Security Challenge #2 (25 words max)

(c) Security Challenge #3 (25 words max)

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3. **Can you specify one information security project and/or security privacy project which you have deployed in the year 2016-2017 and which has added significant benefit to organization, employees, associates, vendors, etc?*** (Mandatory)

(d) Business Needs (50 words max)

(e) Challenges Faced (50 words max)

(f) Solution Implemented (100 words max)

(g) Benefits Achieved (100 words max)

(h) Budget Allocated (50 words max)

Section C Declaration

I hereby undertake that the information furnished above is accurate to the best of my knowledge.

Signature	Date