



Know Your Operations

Use this form to identify what business functions are critical to your business' survival. Duplicate the form for each business function.

Updated: _____

Next Review Date: _____

BUSINESS FUNCTION:

Priority: Extremely High High Medium Low

Employee in charge: _____

Timeframe or deadline: _____

Money lost (or fines imposed) if not done: _____

Obligation: None Legal Contractual Regulatory Financial

Who performs this function? (List all that apply)

(For additional space, use the Notes area)

Employees:

Suppliers/vendors:

Key contacts:

What is needed to perform this function? (List all that apply)

(For additional space, use the Notes area)

Equipment:

Special Reports/Supplies:

Dependencies:

Who helps perform this function? (List all that apply)

(For additional space, use the Notes area)

Employees:

Suppliers/vendors:

Key contacts:

Who uses the output from this function? (List all that apply)

(For additional space, use the Notes area)

Employees:

Suppliers/Vendors:

Key Contacts:



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Brief description of how to complete this function:

Workaround methods:

Notes: