

Red Team Assessment Prerequisite Form

Sr No	Legend	Details	Remark
1	Point of Contact (POC)		
2	Corporate Domain		
3	Business Criticality		
4	Environment		
5	Tentative Start Date		
6	Tentative End Date		
7	Preferred time window for Automated Tool Scanning (if applicable)		

Please Note: Additional Details would be shared after 1st Consultation Call (depending upon scope)