

# UNIVERSITYof HOUSTON

## Continuity of Operations Plan (COOP) Dependency Form

It is crucial to make contact with all dependencies your department rely on in order to perform essential function in the event of an emergency. What are your department's business dependencies whether internal or external? What do you need from that dependency in order to perform the department's essential functions? Complete one form for each dependency.

UH Department:

Type of Dependency:

Internal (UH Department Provided Service)

External (External Partner or Contractor Provides Service)

Dependency (Product/Service):

Provider:

Dependency Contact Name:

Dependency Contact Number:

Has contact been made with dependency department/contractor to confirm services will be available for your department during an emergency?

Yes

No

Date contact was made with dependency: