**CYBERSECURITY (IT) INCIDENT REPORT FORM**

Use this form to report any cybersecurity issues, breaches, hacks, malware, or any other incidents involving a 3rd party.

Date of Report: [DATE]

| **THE INCIDENT** |
| --- |

Date of Incident: [DATE] Time: [TIME] ☐ AM ☐ PM

Type of Incident: ☐ Malware ☐ Data Breach ☐ Other: [OTHER]

How was the incident detected / discovered? [DESCRIBE]

| **CONTAINMENT** |
| --- |

Were any containment measures made? ☐ Yes ☐ No

If yes, describe: [DESCRIBE]

| **IMPACTED SERVICES** |
| --- |

Was anything permanently impacted by the incident? ☐ Yes ☐ No

If yes, describe: [DESCRIBE]

| **ATTACK VECTOR** |
| --- |

Do you know how the attack was made? ☐ Yes ☐ No

If yes, describe: [DESCRIBE]

| **INFORMATION IMPACT** |
| --- |

Was there any data, records, or information breached? ☐ Yes ☐ No

If yes, describe: [DESCRIBE]

| **OTHER** |
| --- |

Is there any other information you would like to include in this report? ☐ Yes ☐ No

If yes, describe: [DESCRIBE]

| **OFFICE USE ONLY** |
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Report received by: [NAME] Date: [DATE]

Follow-up action taken: [DESCRIBE]