Cybersecurity Incident Report

To be completed by user impacted:

Incident Type, if known or guess:

_____Technology Asset Outage

_____Internal threat/extortion

_____External threat/extortion

_____Denial of Service

_____Ransomware

_____Email Phishing

_____Criminal contact/inquiry

_____Theft/loss of equipment

_____Data breach

_____Password request

_____Personal/family threat

_____Other

Activity underway when incident/event occurred including browsers, applications, email, including power outage including name of persons who may have caused incident/event:

Name of technology asset and serial number of impacted including state of operation or not:

Time/Data of Department and Business Area Impacted and Location:

Time/Date Now and of Incident Event:

Name of person and contact information email/tele of impacted or event encountered:

Name of and contact information email/tele of reporting person:

Company/Department and Supervisor Contact:

Time/Date and name of and contact information email/tele of IT/cybersecurity department of incident event notified:

To be completed by IT management

Time/Date and name of CIO/CIO and legal department notified:

Time/Date and name of law enforcement and external agencies notified, if any including cyberinsurance company, external forensics and others:

Time/Data and names of any others who may be involved:

This incident report form was researched from many sources and prepared by CyberSecurityCSI.com is to be a draft for review by legal, IT and other professional advisors, subject to change without notice.