

Security incident report template Word

[Organisation Name]

[Address]

[City, postcode]

[Phone number]

[Date of incident report]

Security Incident Report

1. Incident Details:

Date and Time of Incident: [Date] [Time]

Location of Incident: [Location]

Incident Type: [e.g., Unauthorised Access, Data Breach, Theft]

Incident Severity: [Low, Moderate, High, Critical]

2. Incident Description:

Provide a detailed description of the incident, including what happened, who was involved, and any relevant circumstances leading up to the incident.

3. Affected Systems/Resources:

List all systems, equipment, or resources that were affected by the incident.

4. Impact Assessment:

Describe the impact of the incident, including potential data loss, system downtime, financial loss, or other consequences.

5. Response Actions Taken:

Outline the actions taken immediately after discovering the incident, including any security measures implemented to mitigate further damage.

6. Notification and Reporting:

Indicate whether law enforcement, regulatory authorities, or affected parties were notified, and provide details on the individuals or organizations contacted.

7. Evidence and Documentation:

Attach any relevant evidence, logs, or documentation that supports the incident report. Include witness statements, security camera footage, or system logs, if applicable.

8. Follow-up Actions:

List any ongoing or future actions that will be taken to address the incident, including security improvements, policy changes, or training initiatives.

9. Lessons Learned:

Discuss what lessons were learned from the incident and how similar incidents can be prevented in the future.

10. Recommendations:

Provide any recommendations for improving security or preventing similar incidents in the future.

11. Incident Reporting Personnel:

Name: [Your Name]

Title: [Your Title]

Contact Information: [Your Phone Number]

Email: [Your Email Address]

12. Approval:

[Signature of Supervisor or Security Officer]

Name: [Supervisor/Security Officer Name]

Title: [Supervisor/Security Officer Title]

Date: [Date of Approval]

Please complete this form accurately and promptly to ensure a thorough investigation and response to the security incident. Submit the report to the appropriate department or security personnel as per your organization's policies and procedures.