

PRIVACY IMPACT ASSESSMENT TEMPLATE



REPORTED BY: _____ DATE OF REPORT: _____

TITLE / ROLE: _____ INCIDENT NO.: _____

INCIDENT ASSESSMENT: NEGLIGIBLE MINOR SIGNIFICANT CRITICAL

INFORMATION SECURITY INCIDENT INFORMATION

DATE OF INCIDENT		TIME OF INCIDENT	
INCIDENT MANAGER		TITLE / ROLE	
PHONE		EMAIL	
LOCATION			
SPECIFIC AREA OF LOCATION <i>(if applicable)</i>			
INCIDENT TYPE			

NO. OF HOSTS AFFECTED		SOURCE IP ADDRESS	
IP ADDRESS		COMPUTER / HOST	
OPERATING SYSTEM		OTHER APPLICATIONS	

INCIDENT DESCRIPTION

IMPACT ASSESSMENT

RESULTING DAMAGE

IMMEDIATE ACTION TAKEN

[Empty text area for immediate action taken]

PLANNED ACTION AND RESULTING PREVENTATIVE MEASURES

[Empty text area for planned action and resulting preventative measures]

ADDITIONAL INFORMATION

[Empty text area for additional information]

INFORMATION SECURITY INCIDENT INFORMATION SHARING		
DEPARTMENT REQUIRING NOTIFICATION	POINT OF CONTACT NAME	DATE OF NOTIFICATION

SIGNATURES		
REPORTING STAFF NAME	REPORTING STAFF SIGNATURE	DATE
SUPERVISOR NAME	SUPERVISOR SIGNATURE	DATE

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