

# Websense® Mobile Acceptable Use Policy Kit

## **Security Incident Report**

### CORPORATE SECURITY POLICIES

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**Security Incident Report**

|  |  |
| --- | --- |
| **Company:** |  |
| **User Name:** |  |
| **Department:** |  |

Date of Incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time/Date Incident Detected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Incident Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Incident: Physical: Loss or theft of device containing company information

(Circle one) *Complete Section 1*

Electronic: Suspicious password request, hack attempt, virus infection

*Complete Section 2*

**Section 1: Physical Security Incident**

Media/Device Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Encryption Used: Yes No Confidential Data Involved: Yes No Unsure

Police Report Filed: Yes No Report Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 2: Electronic Security Incident**

Type of Incident:

* Hack attempt
* Denial of Service
* Malicious Code (Trojan/virus)
* Unauthorized system access
* Suspicious password request
* Misuse of systems
* Password compromise
* Other (explain below – Section 3)

Confidential Data Involved: Yes No Unsure

Impact of Incident:

* Data Loss/Corruption
* System Damage
* System/Network Downtime

The information in this document should not be construed as legal advice or opinion and should not be considered representative of the views of Websense or its partners.  This document is not intended as a definitive statement on the subject matter addressed herein; rather, it is intended to serve as a tool providing practical reference for its readers.

* Web Page Defacement
* Other (explain below – Section 3)

**Section 3: All Incidents**

Describe Incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Attach additional

pages if needed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Actions Taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Attach additional

pages if needed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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By signing below I certify that the information I have provided on this form is true to the best of my knowledge:

User Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

User Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*\* Please give this form immediately to the IT Manager or your supervisor \*\*\*

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