

Monarch Cybersecurity Incident Response Report Form

Monarch Helpdesk

Incident No. / ID : _____

INCIDENT IDENTIFICATION INFORMATION

Date and Time of Notification:	Date and Time of Detection:
Incident Detector's Information:	Incident Owner, Handler, Team, Information:
Name: Location:	Name: Location:
Title:	Title:
Phone/Contact Info:	Phone/Contact Info:

INCIDENT SUMMARY

Type of Incident Detected:

- | | | |
|--|---|---|
| <input type="checkbox"/> Denial of Service | <input type="checkbox"/> Missing, Lost, Stolen, Data/PI | <input type="checkbox"/> Unauthorized Use |
| <input type="checkbox"/> Unauthorized Access | <input type="checkbox"/> Unplanned Downtime | <input type="checkbox"/> Other |

Description of Incident:

Names and Contact Information of Others Involved:

INCIDENT NOTIFICATION – OTHERS

- | | | |
|--|--|---|
| <input type="checkbox"/> IS Leadership | <input type="checkbox"/> System or Application Owner | <input type="checkbox"/> System or Application Vendor |
| <input type="checkbox"/> Security Incident Response Team | <input type="checkbox"/> Public Affairs | <input type="checkbox"/> Legal Counsel |
| <input type="checkbox"/> Administration | <input type="checkbox"/> Human Resources | |
| <input type="checkbox"/> Other: | | |

ACTIONS

Identification Measures (Incident Verified, Assessed, Options Evaluated):

Containment Measures:

Evidence Collected (Systems Logs, etc.):

Eradication Measures:

Recovery Measures:

Other Mitigation Actions:

EVALUATION

How Well Did Work Force Members Respond?

Were the Documented Procedures Followed? Were They Adequate?

What Information Was Needed Sooner?

Were Any Steps or Actions Taken That Might Have Inhibited the Recovery?

What Could Work Force Members Do Differently the Next Time an Incident Occurs?

What Corrective Actions Can Prevent Similar Incidents in the Future?

What Additional Resources Are Needed to Detect, Analyze, and Mitigate Future Incidents?

Other Conclusions or Recommendations:

FOLLOW-UP

Reviewed By:

- | | |
|---|---|
| <input type="checkbox"/> Security Officer | <input type="checkbox"/> IS Department/Team |
| <input type="checkbox"/> Privacy Officer | <input type="checkbox"/> Other |

Recommended Actions Carried Out:

Initial Report Completed By:

Follow-Up Completed By:
