
Incident Reporting Form

Incident Reported By:	
Name	
Role	
Department	
Email	
Phone	
Location	
Incident Details	
Status:	Incident Start:
	Incident Discovered:
	Incident Reported:
	Incident Resolved/Closed:
Physical location of the incident (e.g., city, state)	
Source/cause of the incident (if known), including hostnames and IP addresses	
Description of the incident (e.g., how it was detected, what occurred)	
Description of affected resources (e.g., networks, hosts, applications, data), including systems' hostnames, IP addresses, and function	
Incident Category or Type	
Prioritization factors (functional impact, information impact, recoverability, etc.)	
Mitigating factors (e.g., stolen laptop containing sensitive data was using full disk encryption)	
Response actions performed (e.g., shut off host, disconnected host from network)	
Other organizations contacted	
Comments	

Signed by: _____ Date: _____