

**BREACH OF SECURITY  
INCIDENT RESPONSE SUMMARY**

**Instructions:** The lead campus authority (LCA) or designee is responsible for completing this form in connection with each reported incident of a breach of security. The form should be completed as soon as possible following the incident and retained in accordance with the classification of data and applicable campus records retention policy. This form may additionally be filed with the applicable department of the Office of the Chancellor.

\_\_\_\_\_ **CHECK HERE if this document contains not public data.** Examples of not public data include, but are not limited to: private or confidential personnel or education data; or security data.

**Summary of Incident**

**Date incident reported:** \_\_\_\_\_

**Campus and department:**

\_\_\_\_\_

**How discovered:**

\_\_\_\_\_  
\_\_\_\_\_

**Type of breach (including date, if known):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Description of data:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Number of affected individuals:**

\_\_\_\_\_  
\_\_\_\_\_

**Campus and OTC Personnel involved:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Pertinent factors in notice decisions: whether notice required; identifying individuals or groups to be notified; method of notice (if not first class mail)**

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**Date of notice to affected individuals and to credit reporting agency, if applicable (attach sample copy of letter(s) and phone script, Web-site or other communication)**

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**Describe law enforcement involvement, if any:**

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**Responsive actions (steps taken to prevent future similar incidents, including training, changes in procedures, etc.)**

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**Completed by:** \_\_\_\_\_

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