**Security Breach or Access Violation Report**

**1. Basic Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Report Number: |  | Date of Report: |  |
| Time of Incident: |  | Location/Department: |  |
| Reported By (Name & Position): |  | Contact Information: |  |

**2. Type of Security Violation**

*(Select all that apply)*

|  |  |  |  |
| --- | --- | --- | --- |
| ☐ Unauthorized System Access | ☐ Unauthorized Physical Access | ☐ Data Breach (Confidential Information Exposure) | ☐ Password Sharing / Account Misuse |
| ☐ Theft or Loss of Device | ☐ Network or IT Security Breach | ☐ Other (Specify): |  |

**3. Description of Incident**

|  |  |  |  |
| --- | --- | --- | --- |
| Date & Time of Occurrence: |  | Location of Occurrence: |  |
| Persons Involved: |  | Detailed Description of the Incident: |  |
| Systems/Areas Affected: |  | Immediate Actions Taken: |  |

**4. Evidence & Documentation**

|  |  |  |
| --- | --- | --- |
| **Type of Evidence** | **Attached (Yes/No)** | **Description** |
| CCTV Footage | ☐ |  |
| Access Logs | ☐ |  |
| Screenshots | ☐ |  |
| Witness Statements | ☐ |  |
| Other Documents | ☐ |  |

**5. Investigation Details**

| **Field** | **Details** |
| --- | --- |
| Investigator’s Name & Position: |  |
| Date Investigation Started: |  |
| Findings Summary: |  |
| Root Cause Analysis: |  |
| Policy Violated (if any): |  |
| Corrective/Preventive Actions Recommended: |  |

**6. Management Review & Sign-Off**

| **Field** | **Details** |
| --- | --- |
| **Reviewed By (Name & Title):** |  |
| **Date of Review:** |  |
| **Action Approved:** | ☐ Yes ☐ No |
| **Remarks:** |  |
| **Manager/Supervisor Signature:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Date:** |  |

**7. Follow-Up Actions**

| **Follow-Up Action** | **Responsible Person** | **Deadline** | **Status** |
| --- | --- | --- | --- |
|  |  |  |  |