



ACCESS Security Incident Reporting



FBI CJIS Division Information Security Officer (ISO)

	Name of Person Reporting the Incident	
	Date of Report	
	Date of Incident	
1	Point of Contact	
	Point of Contact E-Mail	
	Point of Contact Phone Number	
2	Point of Contact <i>(if more than one)</i>	
	Point of Contact E-Mail	
	Point of Contact Phone Number	
	Location of Incident	
	Incident Description	
	Systems Affected	
	Was Criminal Justice Information (CJI) compromised? If yes, explain.	
	Method of Detection	
	Actions Taken/Resolution	

Individuals involved in a security event are required to complete security awareness training within 30 days of the event (Refer to CJIS Security Policy Awareness and Training – AT (2) Literacy Training and Awareness).

Has this been completed? Yes No

Send completed form to:

Violeta Navarro
WSP ACCESS
PO Box 42619
Olympia WA 98504-2619
(360) 534-2161
access@wsp.wa.gov