

Cyber Incident Form

CONTACT INFORMATION

First Name :

Last Name :

Email :

Phone :

Organisation :

Are there any other contact details you can share to help us in responding to your request?

INCIDENT INFORMATION

When did your incident start?

Is your incident still ongoing or has it stopped?

If relevant, what is the NATO Security Classification of the affected system?

Please provide a brief description of your cyber incident. What has been observed and what are the consequences of the incident?

Was the information about this incident received from a journalist, the media, or a researcher?

Yes No

If yes, have you already liaised with your local Office of Public Affairs?

If relevant, which NATO element is the providing CIS/IT support for this network/device/service?

AUTHENTICATION

Thank you for completing the cyber incident form. Please ensure all information is accurate before submitting. Please send your completed form to ncirtc@ncirc.nato.int along with the PGP Fingerprint: D9E5 81BF 46A5 7F7B D540 CE1C 10BC C16B 11B4 DEC7

DATE OF SUBMISSION

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CONTACT INFORMATION

Address NATO Cyber Security Centre
NCIA
SHAPE, Mons 7010 BE

Email Address ncirtc@ncirc.nato.int

Phone Number ±32 65 44 6666