

**Investigation Report:
Unauthorized Electronic Access to JUSTIN**

Date of Investigation Report:

Name of organization whose employee/contracted worker may have committed the unauthorized use:

Name of organization whose information may have been the subject of an unauthorized use:

Name of investigating Organization:

Contact person:

e-mail:

telephone number:

INCIDENT

- 1. When did the suspected unauthorized access occur?**
- 2. When and how was the suspected unauthorized use first identified?**
- 3. What information was accessed?**
- 4. What was the type of unauthorized use (i.e. creating, viewing, modifying, using, disclosing, or deleting)?**
- 5. What were the consequences of the unauthorized use?**
- 6. Were there any other significant results of the investigation?**
- 7. Are there any recommendations or actions to be taken?**
- 8. The names of other affected parties or bodies that will receive the report of the investigation**