

**PRIVACY BREACH REPORTING FORM**

A privacy breach occurs when there is unauthorized access to or collection, use, disclosure or disposal of personal information. Such activity is “unauthorized” if it occurs in contravention of the *Freedom of Information and Protection of Privacy Act*. The most common privacy breach happens when personal information of our students or employees is stolen, lost or mistakenly disclosed. Examples include when a computer containing personal information is stolen or personal information is mistakenly emailed to the wrong person.

*Please fill out this form in full immediately after you have determined a privacy breach has occurred.*

**YOUR OFFICE/DEPARTMENT:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE OF BREACH: MM / DD / YYYY**

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**DESCRIPTION OF PERSONAL INFORMATION INVOLVED IN THE BREACH**

*Please provide as much detail as possible as to what types of personal information were disclosed.*

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**NATURE OF THE BREACH**

*Please describe whether the breach was paper or electronic in nature and how it occurred.*

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**NUMBER OF PEOPLE AFFECTED BY THE BREACH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*If you are unsure as to the exact amount of people affected, please provide an estimate.*

**INITIAL STEPS TAKEN TO CONTAIN THE BREACH**

*Please describe any action already taken in your office/department (if any) to contain the breach.*

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**HAS NOTIFICATION BEEN GIVEN TO THE AFFECTED INDIVIDUAL(S) BY PHONE OR IN WRITING?**

* YES
* NO

***If YES****: Please provide details and/or attach copies of written notification and send along with this form.*

***If NO****: Please await instruction from the FOI Coordinator before proceeding with any notification.*

**HARM FROM THE BREACH**

 *Identify the type of harm(s) that may result from the breach:*

* Identity theft - (most likely when the breach includes loss of S.I.N., credit card numbers, driver’s licence numbers, personal health numbers, debit card numbers with password information and any other information that can be used to commit financial fraud)
* Risk of physical harm - (when the loss of information places any individual at risk of physical harm, stalking or harassment)
* Hurt, humiliation, damage to reputation - (associated with the loss of information such as mental health records, medical records, disciplinary records)
* Loss of business or employment opportunities - (usually as a result of damage to reputation to an individual)
* Breach of contractual obligations - (contractual provisions may require notification of third parties in the case of a data loss or privacy breach)
* Future breaches due to similar technical failures - (notification to the manufacturer may be necessary if a recall is warranted and/or to prevent a future breach by other users)
* Failure to meet professional standards or certification standards - (notification may be required to professional regulatory body or certification authority)
* Other (specify):

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**YOUR NAME, TITLE AND BUSINESS CONTACT INFORMATION**

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**PLEASE SEND THIS COMPLETED FORM TO:**

**Karen Nolk**

FOI Coordinator

Manager, Payroll & Operations

Human Resources Department

599 Brealey Drive

Peterborough, Ontario

K9J 7B1