



Unauthorized Data Disclosure/Data Breach Complaint Form

Parents, eligible students (students who are at least 18 years of age or attending a post-secondary institution at any age), principals, teachers, and employees of the Oneida Herkimer Madison BOCES may file a complaint about a possible breach or improper disclosure of student data/personally identifiable information. (See, Board Policy 5304.)

If you believe that a breach or unauthorized disclosure of student personally identifiable information or teacher/principal APPR data has occurred, you may submit this form via email to smorris@oneida-boces.org or by regular mail to Data Protection Officer, OHM BOCES, 502 Court St. 3rd Floor, Utica, NY 13502.

CONTACT INFORMATION

Name of Complainant: _____ Date: _____

Address: _____

Home Phone: _____ Cell: _____ Work: _____
(please circle the preferred contact number)

Email: _____ School/Location: _____

The complainant is (check all that apply):

- _____ Parent(s) or Legal Guardian(s) of a Student
_____ Eligible Student (age 18 years or older)
_____ Employee of the District

INFORMATION ABOUT SUSPECTED DATA BREACH / UNAUTHORIZED DISCLOSURE:

Date of Suspected Unauthorized Data Disclosure / Breach: _____

Description of the data suspected of being disclosed or breached: (What specific data/type of data is alleged to have been released without authority?)

Description of the Event: (What happened? How did it happen? Where did it take place? How did you become aware of it?)

Witnesses, if any, or others who may have knowledge of this reported data breach/unauthorized disclosure that may have information that is important to this investigation (include names & email / phone contact information):

Has this type of data breach/unauthorized disclosure been previously reported: _____ Yes _____ No

If yes, when and to whom:

Signature of Complainant

Date

FOR OHM BOCES USE ONLY:

Received By: _____

Date Received: _____

Signature to Confirm Investigation Completed: _____

Print Name & Title: _____

Date Investigation Completed: _____