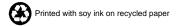
U.S. DEPARTMENT OF ENERGY

REPORT OF SECURITY INCIDENT/INFRACTION

OMB BURDEN DISCLOSURE STATEMENT

Public reporting burden for this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Office of Information Resources Management Policy, Plans, and Oversight, Records Management Division, HR-422 - GTN, Paperwork Reduction Project (1910-1800), U.S. Department of Energy, 1000 Independence Avenue, S.W., Washington, DC 20585; and to the Office of Management and Budget (OMB), Paperwork Reduction Project (1910-1800), Washington, DC 20503.

Part I - NOTIFICATION OF SECURITY INCIDENT Part I. To be completed by the Security Office conducting the preliminary inquiry.				
Organization in which incident occurred:		2. Date of incident:		
3. Nature of incident:				
4. Classification level of information involved: Confidential Secret Top Secret	5. Category of information involved: Restricted Data Formerly Restricted Data National Security Information		6. Identify other caveats of information involved:	
7. Details of incident:				
Name, title, and organization of the individual reporting the security incident: 9.	Signature:		10. Date:	



DOE F 5639.3 (12-93) (Formerly DOE F 5630.13) All Other Editions Are Obsolete

PART II - REPORT BY OFFICE CONCERNED

To be completed by the Office in which incident occurred/originated and return within 15 days to the Cognizant Security Office of the individual receiving infraction.

2. Name and title of person responsible for infraction: 3. Social Security Number: 4. Number of infractions incurred in the last 12 months: 5. Signature of individual receiving infraction: 6. Date: 7. Corrective action taken, to include disciplinary action, if applicable.			
for infraction: Solution	1. Reason or cause for incident:		
for infraction: Solution	2 Name and title of person responsible	3 Social Security Number:	4 Number of infractions incurred in the
7. Corrective action taken, to include disciplinary action, if applicable.	for infraction:	o. Social Security Number.	last 12 months:
		n if applicable	6. Date:
8. Name and title of Office Director: 9. Signature: 10. Date:	7. Corrective action taken, to include disciplinary action	л, п аррисаын.	
8. Name and title of Office Director: 9. Signature: 10. Date:			
8. Name and title of Office Director: 9. Signature: 10. Date:			
	8. Name and title of Office Director:	9. Signature:	10. Date:

PRIVACY ACT STATEMENT

Executive Order 12356, Part 5, dated April 2, 1982, authorizes collection of this information. The primary use of this information is by the Office of Security for documenting security incidents and infractions. The information contained on this form may be disclosed as a routine use to the appropriate agency, whether Federal, State, local or foreign, charged with the responsibility of investigating or prosecuting such incident or charged with enforcing or implementing the statute, or rule, regulation, or order issued pursuant thereto. Information on this form may be disclosed as a routine use to a Federal agency in response to its request in connection with the hiring or retention of an employee, or the issuance of a security clearance. The collection of the employee's Social Security Number is authorized by Executive Order 12356, Part 5. Furnishing the information on this form, including the Social Security Number is strictly voluntary, and will help to ensure accurate and timely processing of this form.