This is a guidance box. Remove all guidance boxes after filling out the template. Items highlighted in turquoise should be edited appropriately. Items highlighted in green are examples and should be removed. After all edits have been made, all highlights should be cleared.



Insert organization logo by clicking on the placeholder to the left.

Cybersecurity Policies Undertaking Form Template

Replace <organization name> with the name of the organization for the entire document. To do so, perform the following:

* Press “Ctrl” + “H” keys simultaneously.
* Enter “<organization name>” in the Find text box.
* Enter your organization’s full name in the “Replace” text box.
* Click “More”, and make sure “Match case” is ticked.
* Click “Replace All”.
* Close the dialog box.

|  |  |
| --- | --- |
| Choose Classification |  |
| DATE | Click here to add date |  |
| VERSION | Click here to add text |  |
| REF | Click here to add text |  |

Disclaimer

This template has been developed by the National Cybersecurity Authority (NCA) as an illustrative example that can be used by organizations as a reference and guide. This template must be customized and aligned with the <organization name>’s business and relevant legislative and regulatory requirements. This template must be approved by the head of the organization (Authorizing official) or his/her delegate. The NCA is not responsible for any use of this template as is, and it affirms that this template is solely an illustrative example.

# Policy Undertaking Acknowledgement

|  |
| --- |
| Employee Name: |
| Employee Number: |
| Job Role: |

I hereby confirm that I have read the following cybersecurity policies of <organization name>:

<List of Policies>:

<Examples>

* Acceptable Use Policy
* Clean Desk Policy
* Cybersecurity Compliance Policy
* Social Media Policy

I hereby acknowledge that the provisions described in the above listed documents are mandatory. I also acknowledge that not adhering to the rules may lead to disciplinary actions as defined in the Human Resources Policies of <organization name>.

<Location>, <Date>

Employee Signature: