GCA CYBERSECURITY TOOLKIT DECLARATION

GCA Cybersecurity Toolkit *For Small Business*

This document attests to the steps this business has taken to implement basic cybersecurity protocols available online through the GCA Cybersecurity Toolkit for Small Business.

BUSINESS NAME:

_____

OUR BUSINESS HAS:

KNOW WHAT YOU HAVE

☐ Conducted an inventory of its applications

Date: _____

☐ Conducted an inventory of its devices

Date: _____

UPDATE YOUR DEFENSES

☐ Installed updates on our operating system(s)

Details (e.g., on all devices, or just some): _____

_____

☐ Installed updates on my applications

Details (e.g., on all applications, or just some): _____

_____

☐ Conducted vulnerability scan on my website

Website Address:_____

Date: _____

☐ Conducted SSL scan on my website

Website Address:_____

Date: _____

BEYOND SIMPLE PASSWORDS

☐ Installed two-factor authentication

On the following devices and applications: _____

_____

PREVENT PHISHING AND VIRUSES

☐ Installed antivirus software

Details (e.g., on all devices, or just some): _____

_____

☐ Installed an adblocker

Details (e.g., on all devices, or just some): _____

_____

PROTECT YOUR BRAND

☐ Implemented DMARC

Email domain:_____

Policy level (none, quarantine, or reject): _____

DEFEND AGAINST RANSOMWARE

☐ Set up backup system for my critical systems and data

Details:_____

_____

Disclaimer: The Global Cyber Alliance does not make any warranties about the completeness, reliability or accuracy of the responses to this attestation survey, as this is an entirely voluntary, self-reported process. GCA does not verify responses. GCA also does not make any warranties about the effectiveness of any tool in the toolkit or the toolkit itself. GCA will not be liable for any losses or damages in connection with use of the material contained in the Toolkit.

SECURITY DECLARATION

I, _____,
hereby affirm that I have taken the above steps toward improving my cybersecurity by using the GCA Cybersecurity Toolkit for Small Business.

Title:_____

Business name: _____

Date: _____