

**ATTESTATION**  
**CYBER SECURITY TRAINING PROGRAM**  
**FISCAL YEAR 2024-2025**

Instructions: • All fields are required

- This form is due to CSC on:

Existing Organizations	December 15, 2024.
Organizations contracting with CSC for the first time	January 15, 2025.

- Submit your signed form to: [compliance@cscpb.org](mailto:compliance@cscpb.org)

**PLEASE DO NOT SUBMIT BEFORE 10/01/2024**

I, \_\_\_\_\_, Chief Executive Officer/Executive Director certify that \_\_\_\_\_ (Provider Agency Name) has implemented a cyber- security training program for all employees that serve Palm Beach County. Our security awareness training includes:

- 1) A testing component that tests all employees serving Palm Beach County regardless of funding source for the position at regular intervals throughout the year **(minimum quarterly)**.
- 2) A tracking component so that Provider or the Council can verify employee compliance.

Total number of employees serving Palm Beach County regardless of funding: \_\_\_\_\_\*

Total number of employees participating in the cyber security training program: \_\_\_\_\_\*

**\*Note: These 2 numbers must match.**

Testing frequency: Please select one option below.

- Weekly
- Twice per month
- Monthly
- Every other month
- Quarterly

Attention: If this is the first time you are receiving CSC funding, please complete this section.

The training program was implemented on

(Date)

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Signature

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Date