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Security Camera and Video Surveillance

Request to Monitor

Name of Employee Requesting Permission to Monitor:

Employee Office Location:

Department:

Location(s) of Camera(s) that is/are being requested to monitor:

Reason for Request to Monitor:

- I have read and acknowledge my understanding of the University's Security Camera and Video Surveillance policy

Signature of Requestor

Signature of Appropriate Vice President

Permission for access to monitor the camera stated above is:

- Approved Denied

Signature, Vice President for Financial Affairs