



REQUEST FOR SECURITY CAMERA(S) FORM

The MUWPD and Information Technology Services will determine locations of University video cameras. Departments wishing to install cameras must complete this form. Completion of this form is only an application for request and does not constitute approval to install security camera(s). You will be notified in writing that your request has been either approved or denied.

REQUESTING DEPARTMENT INFORMATION
Name of Department Requesting: _____
Contact Person for Requesting Department: _____
Email Address for Contact Person: _____
Budget Code of Funding Source: _____

REASON FOR SECURITY CAMERA(S) REQUEST (Example: History of theft or vandalism)

WHAT TYPE OF SECURITY CAMERA(S) IS BEING REQUESTED?

- New Installation of Security Camera(s)
- Disconnect Existing Security Camera(s)
- Remodel or Relocation of Security Camera(s)

LENGTH OF TIME RECORDED FILES CAN BE RETAINED BY REQUESTED SYSTEM _____

ESTIMATED COST(S) OF REQUEST

_____ Cost of Security Camera(s) or Security Camera System

_____ Cost of Installation

Signing below acknowledges that the requesting individual has received and read the University's Security Cameras: Administrative procedures and agrees to comply with those procedures.

Signature of Requesting Individual

Date

Dean or Director Signature: _____	Date _____	APPROVED	DENIED
Cabinet Member Signature: _____	Date _____	APPROVED	DENIED
ITS Reviewer Signature: _____	Date _____	APPROVED	DENIED
MUWPD Reviewer Signature: _____	Date _____	APPROVED	DENIED