重庆外语外事学院调阅监控录像申请表

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| **申请人** | | |  | | | | **申请人所在单位** |  | | | | | |
| **申请人电话** |  | | | | | |
| **辅导员** | | |  | | **姓名** |  | | **查看时间段** | | **起始时间** | |  | |
|  | | **电话** |  | | **结止时间** | |  | |
| **调看监控区域** | | |  | |  | | | | | | | | |
| **查看监控事由** | |  | | |  | | | | | | | | |
| **申请人单位领导意见** | | | | |  | | | | **签名** | |  | | |
| **时间** | |  | | |
| **监控管理人意见** | | | |  | | | | | **签名** | |  | | |
| **时间** | |  | | |
| **查看结果** |  | | | | | | | | | | | | **操作人员（签名）** |
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1、申请人单位领导意见二级学院院长或书记签。

2、监控管理人意见保卫处长或治安管理人签。

3、学生需要调看监控需提交申请表，辅导员陪同调看，不得拍照录像。