



## GMU POLICE CCTV FOOTAGE REQUEST FORM

**NOTE:** All video is the property of George Mason University and the release of any video footage is subject to all Federal and Commonwealth of Virginia laws.

*Please fill in all lines.*

**DATE:** \_\_\_\_\_

**REQUESTOR NAME:** \_\_\_\_\_

**DEPARTMENT or AGENCY:** \_\_\_\_\_

**DATE OF OCCURANCE:** \_\_\_\_\_

**TIME FRAME:      START TIME:** \_\_\_\_\_  
**END TIME:** \_\_\_\_\_

**REASON FOR REQUEST:**  
\_\_\_\_\_  
\_\_\_\_\_

*if more space is needed please fill out a separate sheet of paper and fax with this document.*

*By signing below I agree that the above statement is true and request that the GMUPD release the video footage requested. I also take full responsibility for the security of the footage released to me and will not distribute to any outside parties without prior approval from the University General Counsel under penalty of prosecution.*

**SIGNATURE** \_\_\_\_\_  
**PRINT NAME** \_\_\_\_\_  
**TITLE** \_\_\_\_\_

**APPROVED** \_\_\_\_\_  
**TITLE** \_\_\_\_\_  
**DATE** \_\_\_\_\_

**PLEASE SAVE THIS FORM PRINT AND FAX TO: 703-993-4644**

*revised 5-2012*