NSYSU Library Surveillance System Request the Video Application Form

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name |  | Student ID | |  | Application Date |  |
| Passport No. | |  |
| Department |  | | | Contact Phone No. |  | |
| Location |  | | Timing of Video | | (y) (M) (D) :  to  (y) (M) (D) : | |
| Reasons(More Details):   * **The video can only be used by applicant and cannot be copied or spread.** * **The video is based on Processed Personal Data Protection Law.** | | | | | | |
| Signature of department’s supervisor  （Drillmaster） |  | | | | | |
| 下方資料由館員填寫 Library staff will fill out the following information. | | | | | | |
| 辦理情形： | | | | | | |
| 監視系統管理單位承辦人 | | | | 監視系統管理單位主管 | | |
|  | | | |  | | |