**Commissioner’s CCTV Annual Survey for 2019/20**

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| 1. **Full School Name** | |
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| 1. **Person to Contact in School** | |
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| 1. **Contact’s Position in School** | |
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| 1. **Contact Details** | |
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| 1. **Describe and detail how many different CCTV systems you have on the school campus** | |
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| 1. **Asset number/reference of each camera and description of where it is located in school** | |
| Asset Ref: | Location: |
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| Asset Ref: | Location: |
| 1. **Provide details of the manager responsible for operation of the CCTV system** | |
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| 1. **Provide details of the purposes of CCTV usage** | |
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***This form can be found on BSO*** <https://bso.bradford.gov.uk/content/about-education-client-services>