

Museum Exhibit Area Security Audit Form

Date of Audit

Auditor Name

Exhibit Area/Room

Security Features Checklist

Feature	Present	Notes
Entry/Exit Control	<input type="checkbox"/>	
Surveillance Cameras	<input type="checkbox"/>	
Alarm Systems	<input type="checkbox"/>	
Security Personnel	<input type="checkbox"/>	
Access Control (Badges/Keys)	<input type="checkbox"/>	
Exhibit Cases Locked	<input type="checkbox"/>	

Observations

Identified Issues

Recommendations

Auditor Signature