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| **Record Series Title** | **Retention Period** | **Inclusive Dates** | | **Disposition Code** | **Authorized Signature** | **Records Volume** | **Disposition Date** |
| **From** | **To** |
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**INSTRUCTIONS FOR COMPLETION**

Information in your department’s records retention schedule will be needed to complete the form. Refer to Appendix A of the 9008.1 Records Management Procedure.

**Record Series Title:**

The name or title of the records that will be disposed of.

**Retention Period:**

The length of time the records are maintained. Enter the retention information from the total retention period

**Inclusive Dates:**

The month and year the document was produced to the date of retention period. Enter the earliest and latest dates covered by the records.

**Disposition:**

The action chosen for disposition of the records. Enter one of the following codes.

**(NOTE: ALL RECORDS CONTAINING CONFIDENTIAL INFORMATION MUST BE SHREDDED)**

**A** Contact Library Special Collections (“Archival” column contains “I” or “O”)

**E** Erase magnetic medium and reuse. (Information stored is all public)

**R** Recycle

**SD** Shred in department (“Security” column contains a “C”)

**SAM** Shred in Asset Management

**T** Toss: deposit in trash for pick up

**Signature Authorizing Disposition:**

Signature of the departmental records management contact or the department head. Departmental records management contacts are authorized to approve the destruction of the college’s records. A department head may sign for the contact if necessary.

Volume: The physical amount of records disposed of, estimated in cubic feet. Enter the amount of records that are disposed of.

**Disposition Date**:

The date the records were disposed of by the department. If the records are disposed of by the department, then the departmental records management contact enters the disposition date.