



## **REQUEST FOR RECORDS DESTRUCTION AND/OR FACILITIES FILING**

*Records contained below have completed their lifecycle requirements in accordance with the Administration Regulation C-620-AR "Division Records: Access, Retention and Disposal" (insert link to retention policy when complete) and are now eligible for destruction and/or facilities filing and destruction.*

Records will be (select one):

Destroyed (shredded) on site     Destroyed (shredded) outsourced     Sent to Facilities for Destruction

### DESCRIPTION OF CONTENTS

| # of<br>BOXES | GENERAL DESCRIPTION/CONTENTS | DESTROY<br>DATE<br>MM/DD/YY | DESTROYED<br>BY:<br>MM/DD/YY |
|---------------|------------------------------|-----------------------------|------------------------------|
|               |                              |                             |                              |
|               |                              |                             |                              |

### MANAGER/PRINCIPAL AUTHORIZATION

Records Reviewed by: \_\_\_\_\_ Position Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Please send to Division Office Records Steward for Authorization Prior to Destruction

The records listed above are eligible for immediate destruction and/or facilities filing and subsequent destruction in accordance with the Administration Regulation C-620-AR. A Record Steward is a person ultimately responsible for the records sent for destruction and/or facilities filing and destruction. A Records Steward is at the division level within the FOIP Coordinators Office. Please send this form for authorization. A confirmed signed certificate will be forwarded to you once approved.

### TO BE COMPLETED BY RECORD STEWARD

**CERTIFICATE OF DESTRUCTION**     Destroyed on site     Send to Facilities for Filing and Subsequent Destruction

Destruction Authorization: I hereby certify that I am authorized to act for the division in the matters pertaining to the disposition of the records listed above and that the records proposed for destruction and/or facilities filing and subsequent destruction are eligible.

Records Reviewed by: \_\_\_\_\_ Position Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***If forwarding to facilities please ensure the files are clearly marked with the contents as well as the destroy date. If forwarding student CUM files please ensure they are boxed in alphabetical order by birth year.***