

**USE THIS FORM FOR THE DESTRUCTION OF DUPLICATE
AND NON-UNIVERSITY RECORDS**

TO: RECORDS MANAGEMENT

DEPARTMENT: _____

Records Coordinator

Date

Director/Dean

Date

DESTROY THIS BOX

**THIS LABEL IS TO BE USED FOR THE DESTRUCTION OF ALL DUPLICATE
AND NON-UNIVERSITY RECORDS**

This box cannot be destroyed until proper approval has been authorized.

Please list application number and item number below.

(*See retention schedule for application number, item number, and record title).

APP.# / ITEM #

RECORD TITLE

DATES OF RECORDS

APP.# / ITEM #	RECORD TITLE	DATES OF RECORDS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DO NOT WRITE BELOW THIS LINE - FOR RECORDS MANAGEMENT USE ONLY!!

Date approved for destruction:

Date destroyed:

Destroyed by: