

**RECORDS DESTRUCTION FORM**

Department		Total # of Boxes
Date	Office Address	Telephone

User Box #	R.M. Box #	Retention Schedule Agency Item #	Description of box contents with first and last folder listed. The contents of each box should be listed separately.	Inclusive Dates

**CAUTION:** A state record may not be destroyed if any litigation, claim, negotiation, audit, open records request, administrative review, or other action involving the record is initiated before the expiration of the retention period. The record must be retained until completion of the action and the resolution of all issues that arise from it, or until the expiration of the retention period, whichever is later. Section 441.187(b) Texas Government Code. Any record subject to federal audit must be retained until the expiration of the audit period or the period specified in the TAMUS Records Retention schedule, whichever is later.

 **Request for Physical Plant**

I request that the records accompanying this form be destroyed.

I certify that these are CONVENIENCE COPIES that are no longer needed by the department.

I certify that these are OFFICIAL RECORDS that are past the retention period specified by the TAMUS Records Retention Schedule and that all audit and administrative requirements have been satisfied.

 **Request for Departmental Destruction**

I certify that these OFFICIAL RECORDS are past the retention period specified by the TAMUS Records Retention Schedule and that all audit and administrative requirements have been satisfied.

**Note:** Please read the instructions on page 3 concerning Departmental Records Destruction.

Required Approval		Departmental Destruction
Records Coordinator/PRMIS	Date	Date of Records Destruction
Department Head	Date	Destruction Method Shredding _____ Discard _____ Outside Vendor _____ Deletion from Laserfiche _____
Picked Up or Delivered By	Date	
		Destruction Witness



INSTRUCTIONS FOR FILLING OUT  
THE RECORDS DESTRUCTION FORM

1. Fill in your department name, address, and phone number, the date, and the total number of boxes to be destroyed.
2. Place a **unique** number on each box and write that same number in the **User Box #** Column.
3. Locate a description of your records in the current TAMUS Records Retention Schedule and write the Agency Item number(s) (RRS field #5) that corresponds with the records series in the column labeled **Retention Schedule Agency Item #**
4. Fill in the description of the box contents in the **Description** column. The description can include the Retention Schedule description or your own specific document description.
5. Fill in the inclusive dates of the records box. Please include **month** and **year**.
6. Check **ONE** box for the appropriate action for your documents. Use a separate form for each transaction type.
  - a. **Request for Physical Plant** : Please indicate whether you are requesting disposal of CONVENIENCE COPIES or ORIGINAL RECORDS.
  - b. **Request for Departmental Destruction**: Please list the records you are proposing to destroy. Once the records retention dates have been checked by Records Management and the records are approved for destruction, the form will be returned to the department. At that time the records may be destroyed. Complete the Departmental Destruction Information section once the records have been destroyed and return the form to TAMIU Public Relations, Marketing and Information Services for filing.
7. The Records Coordinator/ Public Relations, Marketing and Information Services and the Department Head must sign the form.