

Records Disposition Application – for records with approved retention rules

This approval for destruction or transfer MUST be obtained in advance of records destruction – see reverse for additional instruction.

1. Disposition Number Contact the Archives for a disposition number. Telephone: 250-721-8275 Email: dayoung@uvic.ca			
2. Unit Name Enter the name of the Unit responsible for the records.			
3. Contact Name and Number Enter your name, title and telephone number.			
		Name and title	Telephone Number
4. Unit Head e.g. Chair, Dean, (A)VP, etc.			
5. Series Number(s) Use the Directory of Records series number.			
6. Series Title(s) Use the series title specified in the Directory of Records.			
7. Format (check all that apply) Remember to delete/destroy electronic copies of paper records, including email, and vice-versa.		<input type="checkbox"/> paper <input type="checkbox"/> electronic <input type="checkbox"/> other:	
8. Extent For paper records, enter the number of boxes being disposed of, e.g. 2 boxes. For electronic records, provide an approximation of the total amount of data being disposed of (e.g. 5 GB, 700 MB etc.) See reverse for more detail.			
9. Date Range Enter the date span in years of all the records being disposed of, e.g. 2001-2004.		From	To
10. Description of Records Series Summarize the content of the records being disposed of. <u>You MUST attach a file list.</u> The file list must include the file titles (name, V#, or subject as appropriate), and the dates the file covers (e.g. 2010-2013). a. For electronic records, provide an expanded folder tree list of folders being deleted (through copy and paste, screenprint, or export to another format). b. For paper records, provide a list of folder titles per box or other container.			
11. Approved Method of Disposition Check the appropriate box. If the records being destroyed include any personal or confidential information, choose <i>Secure Destruction</i> or <i>Secure Deletion</i> .		<input type="checkbox"/> Secure Destruction <input type="checkbox"/> Full Retention/Transfer to Archives <input type="checkbox"/> Secure Deletion <input type="checkbox"/> Selective Retention/Transfer to Archives	
12. Signature of Unit Head _____		Date _____	
13. Signature of University Archivist _____		Date _____	
14. Records Disposition Certification: <i>I hereby certify that the records listed were destroyed or transferred as indicated above.</i>			
Name/Signature of person supervising destruction _____		Date _____	
15. Accession (Archives use only)			
Date Received	Accession Number	Location	

Records Disposition Application – for records with approved retention rules

Use this form to obtain approval to dispose of (destroy or transfer to University Archives) university records with an approved retention rule (AKA retention schedule). All retention rules are found in the [Directory of Records](#).

This requirement applies to Primary Offices only. The Primary Office for each record type is also identified in the [Directory of Records](#).

Non-primary Offices must follow the specified retention rule but do not require written authorization to destroy records as their copies are not considered the authoritative record for the University.

Complete the form and submit along with the file inventory list to the Archives for approval.

When approved:

1. Carry out the destruction according to the [Guidelines For The Secure Destruction And Deletion Of University Records And Information](#), or
2. Arrange for transfer of the records to the Archives.
3. Sign the form at Section 14
4. Return the original signed form to the Archives (Campus mail to “LARC”)

Notes on Specific Sections

5 & 6. Series number and Title

Multiple series can be entered on one form.

7. Format

Note that when destroying a record, ALL formats and versions of that record should be destroyed.

8. Extent

The extent of electronic records can be read from the properties of each folder you are deleting. For instance, in Windows Explorer, right click on a folder(s) or collection of files and select “Properties”. The total file size of the selected item(s) will be displayed.

10. Description of Record Series

If the records are being transferred to the Archives but require restricted access, please indicate the FOI exceptions you think apply.

Contact the Archives for Assistance

Dave Young, Records Management Archivist
Telephone: 721-8275 | Email: dayoung@uvic.ca

Jane Morrison, Associate University Archivist
Telephone: 721-8258 | Email: jmorrison@uvic.ca



University
of Victoria

Records Management