



**Records Retention & Disposition Schedule  
Creation / Revision Request Form**

Agency Information				
<b>Agency:</b> (Name and Code)			<b>Records Officer:</b>	
<b>Sub-Agency 1:</b>			<b>Email:</b>	
<b>Sub-Agency 2:</b>			<b>Phone:</b>	
<b>Date of Request:</b>				
Record Series Information				
<b>Series ID:</b> (if new leave blank)		<b>Series Title:</b>		
<b>Series Description:</b>				
<b>Retention Period:</b>				
<b>Disposition:</b>	<b>Archive</b>		<b>Destroy</b>	
<b>Comments:</b>				
<b>Access Restriction:</b>				
<b>Vital Record?:</b>	<b>Yes</b>	<b>Record Format:</b>	<b>Paper</b>	<b>Electronic</b>
	<b>No</b>		<b>Microfilm</b>	<b>Analog A/V</b>
<b>Electronic Recordkeeping Plan required?:</b>	<b>Yes</b>	<b>Electronic Recordkeeping Plan on file:</b> (Title and Approval Date)		
	<b>No</b>			

Click Submit to  
Email Form

Records\_Retention\_Template  
V2.0 Revised 10/2015