**Instructions**

1. Use this form to document records that have met or exceeded their retention period as defined by the TRU Records Retention Schedule and are requiring destruction.

Note: this form is not required for the destruction of transitory records.

1. List the records to be destroyed: Category of Record from the Records Retention Schedule, a brief description of the records (individual records need not be listed), the years in which the records were created, and the method used to destroy the records (confidential bins, shredding, recycling, [secure electronic disposal](http://www.tru.ca/its/infosecurity/desktopsecurity.html)). Do not include the details of personal information in this listing (names, student numbers, TIDs, etc.).
2. If additional pages are required, please attach.
3. Do not destroy any records pertaining to an ongoing or reasonably anticipated investigation, legal action or proceeding, Freedom of Information (FIPPA) request, audit or program review, even if the retention period or disposition date specified for the records has already expired.
4. Once completed, have the form signed by the Dean/Director (or more senior officer) in your department prior to disposing of the relevant records. The department must permanently retain copies of completed and signed forms.
5. If you have any questions about this form, please contact the Privacy and Access Office at 250-828-5012.

# Office:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Category of Record** | **Description of Records** | **Date Range From****(yyyy/mm/dd)** | **Date Range To****(yyyy/mm/dd)** | **Retention Period as per the Records Retention Schedule** | **Quantity of Records – indicate # of boxes (BX), # of linear feet (LF), # of electronic records(E)** | **Records contain \*PI? (Y/N)** | **Destruction Method** |
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| **Category of Record** | **Description of Records** | **Date Range - From** | **Date Range - To** | **Retention Period as per the Records Retention Schedule** | **Quantity of Records (# of boxes, # of linear feet, # of electronic records)** | **Records contain \*PI?****(Y/N)** | **Destruction Method** |
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**Name of**

**Approving Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Records Destroyed by (name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Destroyed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**