

RECORDS TRANSFER FORM



IMPORTANT – PLEASE READ BEFORE COMPLETING THIS FORM

- This form along with the associated Box Contents Inventory form (Trans 2) must be forwarded to CRS for approval before physical transfer can take place. Refer www.otago.ac.nz/records
- Complete all un-shaded sections
- Records that have been boxed or listed inappropriately may be returned to sender for re-processing!

SECTION 1: REQUEST FOR TRANSFER BY CREATOR/CUSTODIAN OF THE RECORDS

Division / Department:

Office / Section:

Campus Building: Room No:

Preparing Officer: Phone:

Authorised By (Hod): Date:
Day Month Year

SECTION 2: DESCRIPTION OF RECORDS BEING TRANSFERRED (*Refer to GDA Master List of Subjects or alternatively contact CRS staff on ext. 5069 or 5794 for advice*)

'Record Class (Es):

Number of Boxes Transferred:

Inclusive Dates: From To
Day Month Year Day Month Year

Has this type of record been archived previously? Yes No Do Not Know?

SECTION 3: CHECKLIST (*All boxes must be checked 'YES' and a transfer No. issued by CRS before physical transfer can take place*)

- Do the records reflect what is listed on the itemised box contents inventory list? (T2) Yes No
- Have the records been placed in their original sequence / date order as maintained by the transferring office? Yes No
- Are all boxes full (where practicable) and not over-packed? Yes No
- Are all boxes correctly labelled? Yes No

Records Rec'd (Date): Checked By:

Transfer No: