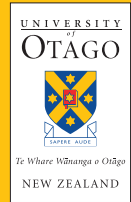


REQUEST FOR APPROVAL TO DESTROY



RECORD DISPOSAL PROCESS

Please use the *Decision Tree* to determine how you should proceed.

(a) **This form is NOT to be used for the destruction of low-level, routine administrative records** such as those that fall into **Class 1: Administration** of the General Disposal Authority (GDA).

(b) **This form is to be used for records that:**

- ~ Have a 'D' [Destroy] action in the General Disposal Authority (GDA);
- ~ Have a retention period under the General Disposal Authority (GDA) of 5 years or more.

(c) **Form Completion**

- ~ Complete sections 1-3 and forward to Corporate Records Services for authorisation.
- ~ The Head of Corporate Records will apply the relevant GDA reference and will advise of the action to be taken. **Please note no action is to be taken before authorisation is received.**
- ~ Corporate Records Services will retain the original signed form for audit purposes, and will return a copy to the school/department/unit/division.

1. CONTACT INFORMATION

School/Department/Unit/Division:

Contact Person:

Telephone Number:

2. RECORDS TO BE DESTROYED

2.1 Title/description/format of all records to be destroyed:

2.2 GDA Reference (if known):

2.3 Date range of records to be destroyed:

2.4 Quantity of records to be destroyed:

2.5 Method of destruction (shredding, confidential waste):

3. INTERNAL AUTHORISATION

I declare that the records described above are no longer administratively required by the school/department/unit/division and that to the best of my knowledge the records are not required for any current or anticipated investigation.

Name of Unit Head:

Signature:

Date:

4. RECORDS DESTRUCTION APPROVAL (To be completed by Corporate Records Services):

4.1 General Disposal Authority reference used to authorise destruction:

4.2 Approved by the Head (or delegate):

4.3 Date of approval: