



Records Management and Retention (RMR) FSA - RMR Office Request for Disposition of University Records

This form is to be used for disposition of records that have met their retention schedule. Each media type must be on a **separate** form. **SEE PAGE 2 FOR INSTRUCTIONS.** **Note:** Incomplete forms or incorrectly completed forms will be REJECTED. If you have any questions, please contact FSA - RMR Office (575) 646-8324 or visit <http://rmr.nmsu.edu/>. Send completed forms to FSA - RMR Office, MSC 3FSA, email to rmroffice@nmsu.edu, or fax a copy to (575) 646-1994.

Contact:		Department:		Phone:	
Email:		Are Records Confidential? Yes: <input type="checkbox"/> No: <input type="checkbox"/>			
Media Type					
Paper <input type="checkbox"/> CD/DVD <input type="checkbox"/> Tape <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other <input type="checkbox"/> _____					
Disposition Log					
Line #	Record Series No. and Title (http://rmr.nmsu.edu/NMACs.html)	Retention Period	Volume (#Boxes)	Date(s) of Record(s)	
1					
2					
3					
4					
5					
Subtotal Volume (#Boxes) from continuation sheet					
Total Volume (#Boxes)					
Remarks					
Department Signatures					
Prepared by:					
Name (printed)		Signature		Date	
Approved by Department Owner/Record Custodian: (For Departmental records only)					
Name (printed)		Signature		Date	
For FSA - RMR Office use ONLY					
Work Order#:		SRCA#:		SRCA Approval Date:	
F.A.T.E. Warehouse Delivery					
Number of Boxes		Received From			Date
		Name (printed)	Signature		
Destruction Method					
<input type="checkbox"/> Shred	<input type="checkbox"/> Confidential: Cintas Pick Up		<input type="checkbox"/> Recycle	<input type="checkbox"/> Transfer to NMSU Archives	
<input type="checkbox"/> Delete Electronic Files					
Approved by FSA - RMR Office:					
Name (printed)		Signature		Date	

Request for Disposition of University Records Continuation Sheet

Contact:		Department:		Phone:	
Email:		Work Order#:			
Disposition Log					
Line #	Record Series No. and Title (http://rmr.nmsu.edu/NMACs.html)	Retention Period	Volume (#Boxes)	Date(s) of Record(s)	
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					
35					
36					
37					
38					
39					
40					
Subtotal Volume (#Boxes)					