



Date:

**Records Disposition Authorization – Parkland School Division**

This form is for the destruction of records in accordance with AP 580, Records Management							
School / Site:				Inventoried by:			Phone:
Record Number	Record Series	Description	Start Date YYYY/MM	End Date YYYY/MM	Retention	Notes	

DESTRUCTION APPROVALS: We certify that records listed above have been retained for the scheduled retention period, required audits have been completed, and no pending or ongoing litigation or investigation involving these records is known to exist.

	Print Name	Signature	Date
Administrator / Department Head			
<b>1. Send form to Executive Assistant, Corporate Supports &amp; Services at (records.management@psd.ca) for review and approval</b>			
Nadine Morrison (or designate)			
<b>2. Form will be sent back to the school / site to proceed with disposition</b>			
Records Destroyed By:			
<b>3. After records have been destroyed, return this form to Executive Assistant, Corporate Supports &amp; Services at records.management@psd.ca for filing.</b>			