

**RECORDS DESTRUCTION FORM**

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Department/Unit				
Date	Office Address	Telephone		
Retention Schedule Agency Item #	Description of Records	Date Range From – To (mm/yy)	Retention Period	Medium

**Departmental Certification/Request for Destruction**

We certify that these state records are past the retention period specified by The Texas A&M University System Records Retention Schedule and that all audit and administrative requirements have been satisfied.  
**CAUTION:** A state record may not be destroyed if any litigation, claim, negotiation, audit, open records request, administrative review, or other action involving the record is initiated before the expiration of the retention period. The record must be retained until completion of the action and the resolution of all issues that arise from it, or until the expiration of the retention period, whichever is later. Tex. Gov't Code § 441.187(b). Any record subject to federal audit must be retained until the expiration of the audit period or the period specified in the System Records Retention schedule, whichever is later.

Required Approval	Departmental Destruction
Department Records Coordinator _____ Date _____	Date of Records Destruction _____
Department Head _____ Date _____	Destruction Method Shredding _____ Electronic _____
Agency Records Officer _____ Date _____	Destruction Witness _____

