



RECORDS DESTRUCTION FORM

Use this form for the destruction of official records (i.e., records for which your unit is identified in MUNCLASS as a "Responsible Unit"). Print and retain a signed paper copy for your records and send a copy to Information Management and Protection (IM@mun.ca).

Department/Unit:		Contact:		Telephone/email:		Date:
Records Class No.	Records Class Title / Description	Date Range	Amount	Destruction method		
Approved By (Name):		Position Title:		Signature:		