DISTRICT SCHOOL BOARD OF PASCO COUNTY
RECORDS MANAGEMENT
REQUEST TO DISPOSE OF SCHEDULED RECORDS

MIS Form #547
Rev. 02/17

Department/School	**Submitted By (Administrator)**

Cost Center Contact Person & Phone Number _____ _____
Date

DESTRUCTION OF RECORDS WITH A RETENTION VALUE

NEED PRIOR APPROVAL

Check only one: ☐ Destruction ☐ Scan and Destroy ☐ Other_____

General Record Schedule GS1 or GS7	Record Series Title	Item Number	Retention	Volume in Cubic Feet	Inclusive Dates

TOTAL NUMBER OF BOXES MARKED **"DESTRUCTION OF CONFIDENTIAL RECORDS"**

_____
Number of Boxes

TOTAL NUMBER OF BOXES MARKED **"DESTRUCTION OF RECORDS TO BE RECYCLED"**

_____
Number of Boxes

Send completed form to Records Management for processing. Request must be submitted to Records Management and approved prior to disposal.