

Request For Records Management Assistance

To: Records Management
2910 LeMone Industrial Boulevard
Columbia, MO 55211

From: _____
Department _____ Campus _____

Office _____

We would appreciate assistance from your office in the following areas:

I. Records Retention & Disposal

- General review of all our records and assistance by your staff in identifying and disposing of records already scheduled.
- Review of our departmental records and development of records retention authorizations.
- Specific records retention information on the following files:

(If necessary, attach a list or additional description)

- Assistance in identifying records eligible for transfer to Archives.
- Information on disposing of confidential or sensitive records.
- Other

II. Filing Systems Support

- Assistance in establishing classified subject files.
- Instructions on how to systematically retire files each year.
- Other

III. Inactive Records Storage at Records Center

- Instructions on procedures to transfer records to Records Center at Columbia
- Other

IV. Electronic Records

- Information on electronic records.
- Information on e-mail management.
- Procedures for electronic records protection.
- Other.

V. Disaster Preparedness

- Planning
- Recovery

Signature of department head or authorized representative

Date

Individual in our department to contact (Print or type name)

Telephone