The City College of New York Office of Information Technology :: Service Desk :: NA 1/301 :: 212.650.7878 :: servicedesk@ccny.cuny.edu ::

CCNY CERTIFICATE OF DESTRUCTION FOR PAPER DOCUMENTS

DEPARTMENT: _____ RECORD RETENTION COORDINATOR: _____

DESCRIPTION OF DOCUMENT* See Examples in "Description/Examples" column on your schedule	RECORDS RET. SCHED INFO FROM "ITEM' COL (e.g., FA-3)	REQUIRED RETENTION PERIOD (e.g., 7 years)	DATE RANGE OF ITEMS	DATE ELIGIBLE FOR DISPOSAL	DATE OF ACTUAL DISPOSAL

* Multiple boxes with the same contents may be described as, e.g., "Contracts, tax forms, I-9 forms (12 boxes). Attach copy of form to each box
View the full manual for procedure at: http://policy.cuny.edu/records_retention_schedule/pdf

PREPARED BY: NAME: _____ SIGNATURE: _____ DATE: _____

APPROVED BY: YOUR DEPT. SUPERVISOR: _____ SIGNATURE: _____ DATE: _____

DOCUMENT DISPOSAL FIRM: _____ INVOICE NO: _____ DATE: _____

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EMAIL