



**Records Destruction Form
Columbia College**

Use this form for the destruction of official records and copies of official records identified as "personal information". Print and submit this form to the Registrar's Office for final approval of destruction. Please refer to the instructions on the reverse side of this form.

Department/Program	Contact Name	E-mail Address	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Brief Description of Records	Date Range		Destruction Method Code
	From	To	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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For Registrar's Office Use Only

Approved by (name)	Title	Signature	Date Sent for Destruction
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>