

### University Archives Records Transfer Form

*This form documents the transfer of records from a University office to the University Archives for permanent storage. The University Archives will store, preserve, and organize records, and make records accessible to the University community and interested public.*

*Please attached an inventory of records if possible.*

**Name of Office / Department transferring records** \_\_\_\_\_

**Name of Person submitting form** \_\_\_\_\_

**Position title and contact information** \_\_\_\_\_

\_\_\_\_\_

**Brief description of records** \_\_\_\_\_

\_\_\_\_\_

**Date range** \_\_\_\_\_

**Number of boxes** \_\_\_\_\_

*(if transferring digital material)*

**Amount and format of digital material** \_\_\_\_\_

**Does this material contain any confidential or restricted records?** \_\_\_\_\_

*(if yes, please explain)* \_\_\_\_\_

**Signature of person submitting form** \_\_\_\_\_

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***For Archives staff use only***

Date received \_\_\_\_\_

Signature of Archivist \_\_\_\_\_