



RECORDS CENTER TRANSMITTAL FORM

Complete this form to transfer University Records for storage at the [Records Center \(IRC\)](#). To be compliant, please review the [University's Records Retention Schedules](#) to list records series, then determine retention periods and disposition dates.

Department Name:				Department Address:		
SIMBA Number: <i>Cost Center (CC), Internal Order (IO), or WBS Element</i>				SIMBA General Ledger (GL):		
Box Number: Current Year-Number	Records Series: See Retention Schedules*	Box Name: Descriptive Range of Folder Titles	Date of Records:	Disposition Date:	IRC Location	IRC Box Number
<i>i.e.; 2018-1</i>	<i>i.e.; Academic Advisor's Files</i>	<i>i.e.; A-L, Graduated 2018</i>	<i>i.e.; 2014-2018</i>	<i>i.e.; 06/2021</i>	<i>(Records Center Use Only)</i>	
Department Contact Name:				Records Center Staff Name:		
PSU Email/Access ID:		Phone Number:		Signature:		
Signature:		Date:		Date:		