



APF-711.4 - Records Disposal Form

Physical location of records prior to disposal: 402 Main Street, Melfort SK

FILE CODE: _____ (** NESD employee who prepares box)
initials-mmdyy

Description of Records to be Destroyed

- LEGEND:**
 HBSD - Hudson Bay School Division
 MSD - Melfort School Division
 MTLSLSD - Melfort Tiger Lily School Division
 NSD - Nipawin School Division
 TLSD - Tiger Lily School Division
 TSD - Tisdale School Division
 NESD - North East School Division

QTY	TYPE	Record Type	Schedule #	School Division	Box #	Description	Date of Record from	Date of Record To



Above records were approved for destruction:

Board Motion - # _____

Letter sent to Sask Archive Board - _____ **Response received from Sask Archive Board -** _____
 DATE DATE

 Signature of Superintendent of Business Administration DATE

 NESD Employee overseeing delivery/pick up to shredding service DATE

 _____  _____
Authorized Shredding Service Employee – PRINTED SIGNATURE DATE (mm/dd/yy)

 Date received notification of record destruction _____
 NESD Employee who received notification - Signature