

THE UNIVERSITY OF ALABAMA
University Archives

Request for Records Transfer

This Records Transfer Form (RTF) *must be filled out and submitted to records@ua.edu* prior to a records pickup being scheduled. The inventory on page two must be filled out thoroughly.

| Office and Contact Information | | | |
|---|--|---------------|--|
| Office | | Division | |
| Building | | Room | |
| Contact Name | | Telephone | |
| Email | | Date | |
| Records Information | | | |
| Record Series Title | | | |
| Retention Period | | | |
| Inclusive Dates | | | |
| Number of Boxes | | | |
| Accession Information <i>(to be filled out by University Archives)</i> | | | |
| Record Group | | Accession No. | |
| Restrictions | | Transfer Date | |
| Temp Loc | | | |

Sender Signature: _____

Receiver Signature: _____

