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| Sample Electronic Records and Imaging Policy and Procedures  For Use by the UNC System Institutions |
| September 2025 |

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**[This policy is modeled after the Department of Natural and Cultural Resources guidance document *Guidelines for Managing Trustworthy Digital Public Records*. This model policy applies to both born-digital electronic records and electronic records generated by imaging systems. Elements specific to the UNC System Institutions are noted and should be adopted accordingly. The guidance documents cited in this sample policy may be included as appendices to your policy. This policy should be tailored by the party responsible for the custodianship of electronic records to the University’s specific electronic records management practices and should provide as much detail as possible. This policy incorporates two additional forms, the *Electronic Records Self-Warranty* form and the *Request for*** ***Disposal of Original Records Duplicated by Electronic Means* form.**

**The North Department of Natural and Cultural Resources requires that any agency that images its records as part of its records retention practices sign this policy after tailoring it to meet agency needs. This policy is also a requirement for agencies maintaining electronic records that have retention periods of ten or more years. The Government Records Section is branch of the State Archives of North Carolina within the Department of Natural and Cultural Resources. When completing this policy, delete portions that are bold and in brackets; these sections either contain optional language or are intended for guidance purposes only.]**

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| Subject: |  | Policy Number: |  |
| Effective date: |  | Modified date: |  |

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| University: | | |  | | |
| Office Drafting Policy: | | |  | | |
| Office Address: | | |  | | |
| Phone: |  | Fax: |  | Email: |  |

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# Purpose

**[Describe the purpose of this policy. What records does it protect, what information technology systems are used by the agency, and when will this policy be updated?]**

The records covered by this policy are in the custody of **[department/office name]** and are maintained for the benefit of delivering services and documenting college operations. This electronic records policy reflects guidelines established in the North Carolina Department of Natural and Cultural Resources publication *Guidelines for Managing Trustworthy Digital Public Records.*[[1]](#footnote-1)Complying with this policy will increase the reliability and accuracy of records stored in information technology systems and will ensure that they remain accessible over time. Exhibiting compliance with this policy will enhance records’ admissibility and acceptance by the judicial system as being trustworthy.

All public records as defined by North Carolina G.S. § 132-1 are covered by this policy. This includes permanent and non-permanent records, including both confidential and non-confidential records. These classifications may warrant different treatments when processing the records. This policy serves as basic documentation of the procedures followed by the department in imaging, indexing, auditing, backing up, and purging electronic records in accordance with the disposition schedule, and in handling the original paper records, if applicable.

**[Applicable to departments/offices with an imaging program]** This policy also serves to protect those records digitized by the college’s **[specify in-house or contracted]** imaging system, which reduces required storage space for original documents as the agency transitions to a “more paperless” digital system and provides instant and simultaneous access to documents as needed.

The form provided in Section 10 of this document, *Request for Disposal of Original Records Duplicated by Electronic Means*, is completed and submitted to the Records Analysis Unit of the Government Records Section whenever this agency wishes to dispose of a series of paper records that have been digitized.

This policy will supersede any electronic records system policy previously adopted. This policy will be reevaluated at a minimum of every **[five]** years, or upon the implementation of a new information technology system, and will be updated as required. A copy of this policy will remain on file with the Government Records Section.

# Responsible Parties

**[Describe the** **electronic records management responsibilities of the persons or departments responsible for adhering to this policy. Tailor this section to reflect the actual parties and their responsibilities within your institution. To go into effect, this policy will be signed by the individuals listed.]**

* + Information Technology (IT) Department
  + University Archivist/Records Officer
  + Department Managers
  + Records Creators

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###### **IT Department**

Responsibilities include:

1. Installing and maintaining equipment and software
2. Configuring the system according to agency needs, including creating and testing applications and indexes
3. Controlling permission rights to the system
4. Maintaining documentation of system hardware and software
5. Establishing audit trails that document actions taken on records stored by the information technology system
6. Providing backups for system records and recovering deleted imaged records when necessary
7. Completing a disaster recovery backup at least once every two years
8. Establishing and providing training on equipment and software, documenting such training, and providing remedial training as needed. **[Such training includes, but is not limited to, training on the imaging system.]**
9. **[For departments/offices with an imaging program]** Creating and updating detailed procedural manuals describing the imaging process and equipment
10. **[For departments/offices with an imaging program]** Conducting any necessary batch conversions or batch renaming of imaged records

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###### **University Archivist/Records Officer**

Responsibilities include:

* + 1. Coordinating with the Government Records Section all requests for records assistance, training, and other offered consultative services
    2. Coordinating interactions between campus business units and the Government Records Section to establish appropriate retention and disposition instructions for any records not included on the UNC System General Records Retention and Disposition Schedule
    3. Providing guidance on the appropriate storage of public records, so they are kept in secure but accessible places
    4. In cooperation with the Government Records Section, establishing and maintaining a program for the selection and preservation of institutional records considered essential to the operation of government and to the protection of the rights and interests of citizens
    5. Participating in the design and implementation of campus electronic records initiatives, to ensure consideration of records management issues

###### **Department/Office Managers**

###### Responsibilities include:

1. Ensuring training of records creators
2. **[For departments/offices with an imaging program]** Periodically auditing imaged records for accuracy, readability, and reproduction capabilities before the original documents are destroyed

###### **Records Creators**

Responsibilities include:

1. Attending and signing off on training conducted by IT staff or by the Government Records Section
2. Creating passwords for computers that are long, complex, and frequently changed
3. Creating and managing electronic records in their purview in accordance with the policies and other guidance issued by the Department of Natural and Cultural Resources and complying with all IT security policies
4. Reviewing records annually and purging records in accordance with the retention schedule
5. Guaranteeing that records, regardless of format, be retained for the period of time required by the institution’s records retention schedules
6. **[For colleges with an imaging program]** Carrying out day-to-day processes associated with the college’s imaging program, including:
   * Designating records to be entered into the imaging system
   * Noting confidential information or otherwise protected records and fields
   * Removing transitory records from the scanning queue
   * Completing indexing guide form for each record being scanned
   * Reviewing images and indexing for quality assurance
   * Naming and storing the scanned images in designated folders
   * Once approved, destroying or otherwise disposing of original records in accordance with guidance issued by the Department of Natural and Cultural Resources
7. **[Applicable to public employees approved to telecommute or use mobile devices]** Public employees who have been approved to telecommute or use mobile computing devices must:

* Comply with all information technology security policies, including the agency and statewide acceptable use policies, as well as all statutes and policies governing public records
* Back up information stored on the mobile device daily to ensure proper recovery and restoration of data files
* Keep the backup medium separate from the mobile computer when a mobile computer is outside a secure area

# Availability of System and Records for Outside Inspection

This institution recognizes that the judicial system may request pretrial discovery of the information technology system used to produce records and related materials. Institution personnel will honor requests for outside inspection of the system and testing of data by opposing parties, the court, and government representatives. Records must be available for inspection and audit by a government representative for the full period required by law and approved records retention schedules, regardless of the life expectancy of the media on which the records are stored. Records must continue to exist when litigation, government investigation, or audit is pending or imminent, or if a court order may prohibit specified records from being destroyed or otherwise rendered unavailable.

In order to lay a proper foundation for the purposes of admitting the institution’s electronic records into evidence, the university will be able to provide up-to-date, detailed documentation that describes the procedural controls employed in producing records; procedures for input control including tests used to assure accuracy and reliability; and evidence of the records’ chain of custody. In addition to this policy, such documentation includes:

* Procedural manuals
* System documentation
* Training documentation
* Audit documentation
* Audit trails documenting access permission to records

The institution will also honor inspection and copy requests pursuant to N.C. G.S. § 132. The institution should produce the records created and used in the course of business, maintaining established folder structure as applicable. The institution should produce records in any format it is capable of producing if asked by the requesting party; however, the institution is not required to create or compile a record that does not already exist. If it is necessary to separate confidential from non-confidential information in order to permit the inspection or copying of the public records, the institution will bear the cost of such separation.

# Maintenance of Trustworthy Electronic Records

Four characteristics are necessary for the maintenance of trustworthy electronic records:

* Produced by Methods that Ensure Accuracy
* Maintained in a Secure Environment
* Associated and Linked with Appropriate Metadata
* Stored on Media that are Regularly Assessed and Refreshed

###### **Produced by Methods that Ensure Accuracy**

All platforms used by the institution to create and manage electronic records, including e-mail clients, social media platforms, and cloud computing platforms, conform with all Department of Natural and Cultural Resources policies and all applicable IT security policies.

Electronic files are named in accordance with the Department of Natural and Cultural Resources file-naming guidance.[[2]](#footnote-2) **[Define your agency’s file naming standards. What abbreviations are used? What kind of file structure is used? How are dates formatted?]**

Electronic files are saved in formats that comply with DNCR’s recommended File Formats for Long-Term Retention of Electronic Records*.[[3]](#footnote-3)* File formats used by the agency are identified as standard by DNCR and are well-supported, backwards compatible, and have robust metadata support.

###### **Maintained in a Secure Environment**

Security of the system and the records it holds is maintained in the following ways:

* Access rights are managed by the IT department and are assigned by a supervising authority to prevent unauthorized viewing of documents.
* Either the information technology system is able to separate confidential from non-confidential information, or data creators must organize and name file systems in such a way to identify confidentiality of the documents. **[specify which]**
* Folders with confidential information are restricted, and access rights to confidential data are carefully managed. Confidential material is redacted before it is shared or otherwise made available.[[4]](#footnote-4)
* Physical access to computers, disks, and external hard drives is restricted.
* All system password and operating procedure manuals are kept in secure off-site storage.

###### **Associated and Linked with Appropriate Metadata**

Metadata is maintained alongside the record. At a minimum, metadata retained includes file creator, date created, title (stored as the file name), and when appropriate, cell formulae and e-mail header information. Employees are not instructed to create metadata other than metadata that is essential for a file’s current use and/or retention.[[5]](#footnote-5)

###### **Stored on Media that are Regularly Assessed and Refreshed**

Data is converted to new usable file types as old ones become obsolete. The following steps are taken to ensure the continued accessibility of records kept in electronic formats:

* Data is audited and assessed annually. If there is evidence of file corruption, data should be migrated to new media.[[6]](#footnote-6)
* Records are periodically verified through hash algorithms. This is required before and after transfer to new media to ensure the records were not altered.
* Media is refreshed every three to five years. The agency documents when and how records are transferred from one storage medium to another. Once the new media has been sampled to assure the quality of the transfer, the original media may be destroyed according to the guidelines of 07 NCAC 04M .0510.
* Records are periodically migrated to new file types, particularly when a new information technology system requires that they be brought forward in order to render the file properly.
* Metadata is maintained during transfers and migrations.
* Storage media are maintained in a manner and in an environment that promotes bit-level preservation. Humidity does not exceed 50% and should not fall below 30%. Room temperature is set between 65° F to 75° F. The agency adheres to the media manufacturer’s recommendations for specific environmental conditions in which the media should be stored.
* Whatever media is used to store data is clearly labeled with enough information that its contents can be determined (e.g., optical media should have a physical label; data stored on a server should be indexed or held in a document management system).

# Components of Information Technology System

* Training Programs
* Audit Trails
* Audits

###### **Training Programs**

The IT department will conduct training for system use and electronic records management, using material published by the Department of Natural and Cultural Resources when appropriate. All employees will be made aware of system procedures and policies and trained on them; employees will acknowledge by initialization or signature that they are aware of the policies and have received training on them. When appropriate, employees will also attend training offered by the Government Records Section on the maintenance of electronic records. Documentation will be maintained for the distribution of written procedures, attendance of individuals at training sessions and refresher training programs, and other relevant information.

###### **Audit Trails**

At a minimum, the IT department will maintain documentation on who has read and/or write permission to files maintained by the agency. **[Identify what user activity will be documented. For example: A log of actions on the system is maintained, which shows who accessed the system, how and by whom records were created and modified, and whether standard procedures were followed.]**

###### **Audits**

Audits are designed to evaluate the process or system's accuracy, timeliness, adequacy of procedures, training provided, and the existence of audit trails. Internal audits are conducted regularly by agency IT staff, at least **[annually]**.

# Documentation of Information Technology System

* System Design
* Retention of System Documentation

###### **System Design**

The institution maintains documentation that describes system procedures, practices, and workflows. This documentation also identifies system software and hardware and captures the system environment in terms of the organizational structure, functions and responsibilities, and system processes. It explains how the system operates from a functional user and data processing point of view. Documentation is reviewed and updated by IT staff **[annually]** or upon implementation of a new information technology system. Such documentation maintained by the institution includes:

* Procedural manuals
* System documentation
* Security backup and disaster recovery procedures as a part of the Continuity of Operations Plan
* Service level agreements for contracted information technology services

###### **Retention of System Documentation**

One set of all system documentation will be maintained during the period for which the records produced by the process or system could likely be subject to court review and until all data created by every system instance has been destroyed or transferred to a new operating environment. All such documentation is listed in the institution’srecords retention schedule.

# Digital Imaging Program Documentation and Procedures

* System and Procedural Documentation
* Training
* Indexing and Metadata
* Auditing and Audit Trails
* Retention of Original and Duplicate Records

###### **System and Procedural Documentation**

The IT department is responsible for preparing and updating detailed procedures that describe the process followed to create and manage imaged electronic records. This documentation will include a description of the system hardware and software. A current procedural manual will be maintained to ensure the most current steps are followed and to ensure reliable system documentation will be available for judicial or similar proceedings.

Each workstation designated as a scanning station will have, at a minimum, the following hardware and software, unless the scanner is collocated by means of a network interface:[[7]](#footnote-7)

* Document/image scanner authorized by IT **[specify scanner manufacturer and model number]**
* Driver software for scanner **[specify]**
* Imaging software **[specify]**
* Instructions manual, maintained by IT staff, describing in detail the steps required in the scanning process. This manual will also define:
  + The resolution of scanned images, as well as any compression standard used
  + The file formats of scanned images
  + The file naming conventions used for scanned images
  + Whether batch conversion or batch file re-naming will be necessary, and what tool is used for such conversions
  + Whether any image enhancement techniques should be conducted after imaging

###### **Training**

**[For universities that scan in-house]** Only designated staff that have been formally trained by IT staff and have signed off on training documentation on the use of the imaging software and equipment will be allowed to scan records. Components of the training will include basic techniques for image capture, indexing, quality control, security configuration, auditing, use of equipment, and general system maintenance. Permissions to image and index records will not be assigned until the user has been trained. If a user improperly indexes or scans a document, an auditor will address this occurrence with the user, and remedial training will be required.

###### **Indexing and Metadata**

All imaged records must be indexed in order to facilitate efficient retrieval, ease of use, and up-to-date information about the images stored. This index will be developed by IT staff prior to the implementation of any imaging system and should follow guidelines established in Metadata as a Public Record*[[8]](#footnote-8)*. The guidance includes the capture of content, structure, and context of the imaged records. Metadata will be maintained in accordance with the guidelines provided in Section 4, *Maintenance of Trustworthy Electronic Records*.

###### **Auditing and Audit Trails**

Staff trained to conduct imaging will conduct a quality control audit following the imaging of a record to ensure that the following features of the imaged record are legible:

* Individual letters, numbers, and symbols
* Combinations of letters, numbers, and symbols forming words or sentences
* Graphics such as signatures, logos, and pictures
* Other features of records such as color, shape, texture, etc., that relate to the content of the information

Managerial staff for the various departments of the institution will also periodically audit imaged records for accuracy, readability, and reproduction capabilities. Written quality control documentation will be prepared indicating the sampling of records and what remedial procedures were followed if the expected level of accuracy was not achieved.

**[For contracted imaging systems]** Audit trails should be built into the imaging system that will automatically document who creates, duplicates, modifies, or otherwise accesses records and what procedures were taken. Audit trails include the success or failure, date, time, and user of the following events:

* Add/Edit electronic document
* Assign index template
* Copy document
* Copy pages
* Create document/folder
* Delete entry
* Delete pages
* Delete volume
* Edit image
* E-mail document
* Export document
* Index creation/deletion/modification
* Insert page
* Log in/out
* Move document
* Move pages
* Print document

**[For universities that scan in-house]** Managerial staff will document by position title employees that have the authority to complete each of the tasks listed.

###### **Retention of Original and Duplicate Records**

To obtain permission to destroy original records following imaging, **[department/office]** will:

* complete a *Request for the Disposal of Original Records Duplicated by Electronic Means* (SEE: Section 10 of this document)
* Obtain approval of the records custodian for the destruction of the original records
* Send the approved form to the Records Analysis Unit of the Government Records Section for review prior to destruction

Permanent records may be imaged for ease of access, but the original documents may not be destroyed unless an analog copy exists prior to the records’ destruction.[[9]](#footnote-9)

Destruction of original records is allowed only after quality assurance has been conducted on the imaged records, necessary corrections have been made, the electronic records system is audited for accuracy, and the destruction of records has been approved.

If digital images replace the original records and assume all legal authorities, these scanned records will be considered the record copy and must be maintained for the specified retention period defined in UNC System General Records Retention and Disposition Schedule.[[10]](#footnote-10) The retention period is considered to have begun when the original document was created, not when the electronic version was produced. Any hard copy generated from the imaged records will be considered the institution’s duplicate “working” record or reference copy.

# Other Electronic Records Management Practices

* System Planning
* Shared Drive Management
* Security and Disaster Backup and Restoration
* Cloud Computing
* Text Messaging, Instant Messaging, and Mobile Device Management
* **[For agencies that contract electronic records management services to third-party vendors]** Contracting

###### **System Planning**

**[Explain for what purposes the university uses traditional paper media, electronic systems, or microfilm, based on what format best serves the records retention requirements of unique records groups. Also explain how the university plans for hardware and software updates, particularly how it takes future budgetary implications into consideration.]**

###### **Shared Drive Management**

Employees use shared storage for collaboration and access. Procedures for the use of this shared storage comply with DNCR’s guidance regarding Shared Storage and Cloud Computing.[[11]](#footnote-11)

###### **Security and Disaster Backup and Restoration**

The institution has a disaster recovery plan for its electronic data in place, which includes contact information for data recovery vendors and information about backups of all data. Security backups to protect against data loss are generated for all but the most transitory of files. Routine backups are conducted **[define how often backups are conducted]** and are stored in secure off-site storage **[define where backups are stored, and on what type of storage media]**. **[See *Security Backup Files as Public Records in North Carolina: Guidelines for the Recycling, Destruction, Erasure, and Re-use of Security Backup Files* for guidance on the appropriate retention and destruction of backup files.[[12]](#footnote-12)]**

**[For universities with imaging programs]** Imaged documents will be synchronized to a secured offsite location **[immediately]** upon document changes or upon document scanning.

###### **Cloud Computing**

**[For universities that store electronic records using cloud-based technology: describe your institution’s cloud-based practices. How is the technology used: as a storage site that mirrors locally hosted data, as the sole storage entity for data, or as a collaboration tool used during the drafting process? What backup measures are in place? Should the vendor fail or should the agency otherwise discontinue service with the vendor, is the university able to recover its electronic records, and in what form is that data available? For more guidance, please see the DNCR guidance regarding Cloud Computing and Records Management.[[13]](#footnote-13)]**

###### **Text Messaging, Instant Messaging, and Mobile Device Management**

**[For universities whose employees conduct public business using mobile devices. Describe how text/instant messaging is currently used in your offices. Do employees use workplace-issued devices or personal ones? What applications or platforms? Are there any needs specific to the office that text/instant messaging helps to address, such as administrative purposes or communication with other departments/third parties? How are employees informed of how to manage digital communications in accordance with public records law? Are text/instant messages being stored and retained by the office? If not, can existing practices be adapted, or is a new method needed? How can office policy address the legal implications of e-discovery regarding the use of texting/instant messaging? For further guidance on these issues, contact Government Records Section]**

###### **Vendor-Provided Services/Hosted Solutions**

**[For universities that contract out electronic records management services, including digital imaging]**

The terms of the service level agreement with **[third-party contractor]** detail:

* File formats
* Plan for converting files to a new format
* File naming practices
* Access rights/security mechanisms
* Backups (specify frequency and location)
* Mechanism for destructions
* Audits (data should be audited at least annually to test accessibility and assess need for refresh or migration)
* Frequency of refreshing of media (should be at least every 3-5 years)
* Frequency of checksum validation (should be at least at every migration)
* Environmental conditions where media is stored (humidity 30-50%, temperature 65-75°F)
* Training program
* Disaster recovery procedures
* System documentation/procedural manual – a copy should be provided to the agency that specifies what hardware and software are provided by the vendor
* System for indexing records
* Quality control procedures
* Mechanism for document production due to litigation, audit, or public records request
* Mechanism for avoiding spoliation of evidence
* Costs for:
  + Uploading records
  + Downloading records
  + Migrating records
  + Service termination
  + Proprietary software necessary to access records **[if applicable]**
* Performance/availability (e.g., planned and unplanned downtime)
* Ownership of data
* Procedure for exporting records (including images as well as metadata) at end of contract period and/or when vendor ceases operation

# Compliance and Electronic Records Self-Warranty

The completion of this form by all signing employees signals that all employees will adhere to the rules set forth in this policy. Furthermore, this section is to be used as a self-evaluation tool to ensure that electronic records produced by the institution are created, reproduced, and otherwise managed in accordance with guidelines for electronic public records published by the North Carolina Department of Natural and Cultural Resources. **[The self-warranting of records in itself does *not* authorize the destruction of records, originals or copies, *nor* does it change current records retention and disposition scheduling procedures. Destructions of records are authorized when your institution approves the current retention and disposition schedule. If scanned records are intended to take the place of original paper records, departments/offices must submit the *Request for Disposal of Original Records Duplicated by Electronic Means* form.****]**

Each signatory should initial each element for certification, print his/her name on the Approved by line, fill in the job title, and sign and date the form.

###### **IT Professional**

The IT Professional is the person responsible for providing technical support to the records custodians and who may be involved in infrastructure and system maintenance. The IT Professional certifies that:

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|  | Audit trails document the identity of the individual who creates, duplicates, modifies, or otherwise prepares the records, what actions are taken by the individual during the course of the process, when these actions are taken, and what the results of these actions are. |
|  |
| Audits:   * are performed periodically to confirm that the process or system produces accurate results. * confirm that procedures followed are in accordance with the agency’s documentation. * are performed routinely on files to ensure no information has been lost. * are performed by an independent source (i.e., persons other than those who create the records or persons without an interest in the content of the records. Acceptable sources may include different department or authorized auditing authority). * are adequately documented. |
|  |
| The process or system hardware and software are adequately documented. |
|  |
| Permanent records conform to all file format, file naming, and digital preservation guidance produced by the Department of Natural and Cultural Resources. |
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| Backup procedures are in place and comply with best practices as established by the Department of Natural and Cultural Resources. |
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| Successful disaster recovery backup is completed at least once every two years. |
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| Approved by: |  | Date: |  |
| Title: |  |  |  |
| Signature: |  |  |  |

###### **University Archivist/Records Officer**

The University Archivist/Records Officer coordinates records management training and compliance. The University Archivist/Records Officer certifies:

|  |  |  |  |  |  |
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| **\_\_\_\_\_\_** | Participation in the design and implementation of campus electronic records initiatives. | | | | |
|  |
| Approved by: | |  | Date: |  |
| Title: | |  |  |  |
| Signature: | |  |  |  |

**Records Custodian/Managerial Staff**

The records custodian is the person responsible for creating records or managing the staff who create records.[[14]](#footnote-14) The records custodian certifies that:

|  |  |
| --- | --- |
| **\_\_\_\_\_\_** | The records created or duplicated by electronic means in this office are prepared in accordance with these guidelines as indicated by the following statements: |
|  |
| * Quality - Records are legible, accurate, and complete. * The records are produced or reproduced as part of a regularly conducted activity. * The records conform to DNCR guidance regarding file formats, file naming, and if applicable, digital preservation guidance produced by DNCR. * Detailed, documented procedures are in place and followed when the records are created, copied, modified, or duplicated. * The person who creates, copies, modifies, or duplicates records receives formal training on detailed system procedures prior to records preparation. * Details of the training received are adequately documented through written policies and procedures. * Employees sign training records after receiving training. |
| This institution will comply with the best practices and standards established by the Department of Natural and Cultural Resources as published on its website. |
| **\_\_\_\_\_\_**  **\_\_\_\_\_\_** |
| This department/office will submit to the University Archivist/Records Officer a completed *Disposal of Original Records Duplicated by Electronic Means*, to seek approval for the destruction of original records that have been converted from paper to electronic record. |
|  |
| **\_\_\_\_\_\_** | Affected records creators will be trained on the proper creation and maintenance of electronic records. |
| **\_\_\_\_\_\_** | Imaged records will be periodically audited for accuracy, readability, and reproduction capabilities before the original documents are destroyed. |

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| Approved by: |  | Date: | |  |
| Title: |  |  |  | |
| Signature: |  |  |  | |

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# 10. Disposal of Original Records Duplicated by Electronic Means

This form is used to request approval from the Government Records Section to dispose of **non-permanent** paper records that have been scanned, entered into databases, or otherwise duplicated through digital imaging or other conversion to a digital environment. This form does not apply to records that have been microfilmed or photocopied.[[15]](#footnote-15)

**Request for Disposal of Original Records Duplicated by Electronic Means**

*If you have questions, call (919) 814-6900 and ask for a Records Management Analyst.*

This form is used to request approval from the University Archivist/Records Officer to dispose of non-permanent paper records that have been scanned, entered into databases, or otherwise duplicated through digital imaging or other conversion to a digital environment. This form does not apply to records that have been microfilmed or photocopied or to records with permanent retention.

|  |  |  |
| --- | --- | --- |
| **Contact Name:** | | **Date (MM-DD-YYYY):** |
| **Phone (area code):** | **Email:** | |
| **Office:** | | |

**Before** a college/university office may destroy any paper record that has not met its required retention period and keep only a digital surrogate of that record, **all** the following conditions must be met:

* The office agrees to abide by all guidelines and best practices as published by the Department of Natural and Cultural Resources, including guidance regarding [File Naming](https://archives.ncdcr.gov/government/digital-records/digital-preservation-and-access/file-naming) and [File Format Guidelines for Management and Long-Term Retention of Electronic Records](https://archives.ncdcr.gov/government/digital-records/digital-preservation-and-access/file-formats-long-term-preservation-electronic-records)
* An electronic records policy has been approved by the office and authorized by the University Archivist.
* Quality control audits have been performed on the electronic records.
* The digital surrogates will be retained for the entirety of the required retention period.

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| --- | --- | --- | --- | --- |
| **Records Series Title**  A group of records as listed in records retention schedule | **Description of Records**  Specific records as referred to in-office | **Inclusive Dates**  (1987-1989; 2005-present)1 | **Approx. Volume of Records**  (e.g. “1 file cabinet,” “5 boxes”) | **Retention Period**  As listed in records retention schedule |
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| Concurred by: |  |  |  |
| Signature | | University Archivist / Records Officer | Date |

If an office uses an open-ended date on this authorization form, the destruction of records must be listed on a destructions log with the precise dates of the records destroyed at a given time.

1. https://archives.ncdcr.gov/government/digital-records/digital-records-policies-and-guidelines/guidelines-managing-trustworthy [↑](#footnote-ref-1)
2. https://archives.ncdcr.gov/government/digital-records/digital-preservation-and-access/file-naming Webpage specifies file-naming standards, abbreviations, and file structure guidelines [↑](#footnote-ref-2)
3. https://archives.ncdcr.gov/government/digital-records/digital-preservation-and-access/file-formats-long-term-preservation-electronic-records [↑](#footnote-ref-3)
4. For questions regarding redaction, please consult the Government Records Section [↑](#footnote-ref-4)
5. For more information, see DNCR’s webpage, Metadata as a Public Record(https://archives.ncdcr.gov/metadata-public-record) [↑](#footnote-ref-5)
6. [↑](#footnote-ref-6)
7. If your scanner is networked, you will only have one response to each of the first three items. If you have separate workstations throughout your agency, we recommend an inventory that specifies the equipment and software used at each workstation. [↑](#footnote-ref-7)
8. https://archives.ncdcr.gov/metadata-public-record [↑](#footnote-ref-8)
9. Any permanent records maintained in electronic form must also exist as a paper or microfilm preservation duplicate copy in compliance with the Department of Natural and Cultural Resources *Human-Readable Preservation Duplicates* policy (https://archives.ncdcr.gov/government/digital-records/digital-records-policies-and-guidelines/human-readable-preservation). [↑](#footnote-ref-9)
10. The Society of American Archivists *Glossary of Archival and Records Terminology* defines record copy as “the single copy of a document, often the original, that is designated as the official copy for reference and preservation.” Available at <http://www2.archivists.org/glossary/terms/r/record-copy>. [↑](#footnote-ref-10)
11. https://archives.ncdcr.gov/node/1059 [↑](#footnote-ref-11)
12. https://archives.ncdcr.gov/government/digital-records/digital-records-policies-and-guidelines/security-backup-files-public [↑](#footnote-ref-12)
13. https://archives.ncdcr.gov/cloud-computing-and-records-management [↑](#footnote-ref-13)
14. G.S. § 132-2 specifies, “The public official in charge of an office having public records shall be the custodian thereof.” Therefore, the individual signing this section will likely be the head of the organizational unit (i.e., department or office). [↑](#footnote-ref-14)
15. Please contact the Records Analysis Unit with any questions about the destruction of original paper records. [↑](#footnote-ref-15)