



Records Retention/Disposition Authorization (RDA) Change Request

This document must be submitted to the SRC by an Agency Record Officer.

Email completed form to: DOADEORecordsCenter@wisconsin.gov

Note: This request is used for Division Moves, Closing an RDA and/or Superseding an RDA which do not require Public Records Board (PRB) review. Multiple changes can be submitted on one form. Start entering your data in Row 1 of the table below. The example text will disappear as you type.

Requestor Information -- All answers are required.

Agency Name:	Agency Number:
Record Officer Authorizing Change(s):	Date:

Change Request - Option 1 - Division Move Only

This option is for Division changes within your Agency. For Agency to Agency changes, contact Kathryn Egeland. No other changes can be made to the RDA. If anything else is being changed, submit the RDA for review to the Public Records Board as Amended. **In the Details section below, provide Old Division Number, New Division Number. Any existing inventory will also move unless otherwise specified.**

Change Request - Option 2 - Closing an RDA

This option is used when the Agency no longer creates or receives records for this series. **In the Details section below, provide the Life Cycle Dates - Year Created, Year Discontinued and Year of Final Disposition. Existing inventory will continue to be governed by the closed RDA.**

Change Request - Option 3 - Superseding an RDA

This option is used when an RDA is replaced. The "Move To" RDA must already exist and cannot have an expired sunset date. The RDA entered, should be the RDA that will ultimately close. **In the Details section below, provide the "Move To" RDA number, Division and Title. Include instructions on whether or not any existing inventory should be moved.**

RDA # (8 digits)		RDA Title	Change Requested			Details
1	12345678	Example 1	<input checked="" type="checkbox"/> Option 1	<input type="checkbox"/> Option 2	<input type="checkbox"/> Option 3	Current Division - 012; move to - 018
2	00123000	Example 2	<input type="checkbox"/> Option 1	<input checked="" type="checkbox"/> Option 2	<input type="checkbox"/> Option 3	CR-2003; DIS-2010; DISP-2015
3	00567A00	Example 3	<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2	<input checked="" type="checkbox"/> Option 3	Move to RDA 345; Division 209, "Audit Reports" Move Existing Inventory
4			<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2	<input type="checkbox"/> Option 3	
5			<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2	<input type="checkbox"/> Option 3	
6			<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2	<input type="checkbox"/> Option 3	
7			<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2	<input type="checkbox"/> Option 3	
8			<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2	<input type="checkbox"/> Option 3	
9			<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2	<input type="checkbox"/> Option 3	
10			<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2	<input type="checkbox"/> Option 3	

This form can be made available in alternate formats to individuals with disabilities upon request.