

Regional/Program Records Disposition Certification

I, the responsible official identified below, certify that I wish to dispose of the following records; and have provided this certification to the FWS Records Officer (or Regional Records Officer) for review/concurrence.

Records Series: (Example: ADMI-146 Volunteer Personnel Files (N1-022-02-01/01))

Description:

(For Records Schedule See <http://www.fws.gov/policy/a1283fw2.html>)

Records destroyed from: _____

Date of destruction: _____

And that I have reviewed those records and can state the following:

1. The records are not subject to any litigation hold as provided on the Office of the Solicitor's Litigation Hold Listing (See <http://www.fws.gov/irm/bpim/recman.html>)
2. The records are eligible for destruction in accordance with the FWS Records schedule. (See <http://www.fws.gov/policy/a1283fw2.html>)
3. The office has checked the Electronic FOIA Tracking System (EFTS) and the records are not subject to a current access (FOIA/Privacy Act request). (See <https://efoia.ios.doi.gov/efits/start.jsp>) **Note:** Because there is controlled access to the EFTS you may have to contact your Regional or Program FOIA Coordinator or the FWS FOIA Officer
4. I have checked with the Headquarters (or Regional) Diversity and Civil Rights Office to confirm the records are not the subject of a current investigation. (HR-DCR 703/358-1743)
5. I will retain this approved certification for a period of 6 years from the date of the FWS Records Officer's concurrence.

NAME AND TITLE: (Division Chief, Office Chief, Branch Chief)

SIGNATURE AND DATE: (Division Chief, Office Chief, Branch Chief)

(SIGNATURE AND DATE: (FWS Records Officer/Regional Records Officer)