NORFOLK STATE UNIVERSITY

DOCUMENT SHREDDING ACKNOWLEDGEMENT FORM

Responsibilities for Safeguarding Secure, Sensitive, and/or Confidential Documents Disposed of via Shredding Consoles or Containers

I acknowledge that I am responsible for the safeguarding of secure, sensitive and/or confidential documents in the areas under my purview and that I am familiar with the University's Administrative Policy #33-04 on protecting personal non-public information (PNP). I also understand that the responsibilities for management, retention, and disposition of Norfolk State University records as mandated by the Virginia Public Records Act (VPRA), Code of Virginia §42.1-76-§42.1-91 will be adhered to as written.

I Understand:

a) that I am being entrusted with consoles and containers for disposal of secure sensitive and/or confidential documents that require shredding;

b) that I will ensure these consoles or containers are kept in a safe and secure area at all times and the area will be locked when unoccupied by university employees;

c) that employees that have access to these consoles or containers are knowledgeable of the university's policy and procedures on protecting personal non-public information (PNP) and have signed this document acknowledging their responsibilities of such;

d) that official university records that require retention in accordance with the Commonwealth of Virginia's Record Act, VPRA will not be placed in these consoles or containers unless the appropriate forms have been completed and approved prior to destruction of such records;

e) that I or my designated representative will make periodic checks (at least monthly) to ensure the safety, location, and security of the consoles or containers; and

f) that I will notify Procurement Services of any changes in location or removal of such console or container.

Agreed and Accepted:

Name and Signature of Requester:

_____ _____/_____

Printed Name Signature Date

Number of Console(s) or Container(s) Requested: _____ Building: _____

Department: _____Room No._____ Tel. No. _____

Note: Please review and complete the form in its entirety, sign and return to Procurement Services, Suite 150 to the attention of Vicki N. Lewis, Procurement Manager. **Revised 3/2019**