

STATE AGENCY SURVEY/INVENTORY FORM

Kansas State Historical Society - Library/Archives Division

1. AGENCY		2. SUB-AGENCY	
3. OTHER ORGANIZATIONAL UNIT (section, bureau)		4. LOCATION OF RECORDS	
5. PERSON RESPONSIBLE FOR MAINTAINING RECORDS		6. TELEPHONE	
7. RECORDS SERIES TITLE			
8. RECORDS SERIES DESCRIPTION (Nature and purpose, types of information or documents. Continue on reverse if necessary.)			
9. INCLUSIVE DATES FROM _____ THRU _____		10. RECORD FORMAT <input type="checkbox"/> PAPER (specify type/size) _____ <input type="checkbox"/> MICROFORM (specify) _____ <input type="checkbox"/> ELECTRONIC (specify) _____	
11. ARRANGEMENT <input type="checkbox"/> CHRONO <input type="checkbox"/> ALPHA <input type="checkbox"/> NUMERICAL BY _____ OTHER (specify) _____		12. TOTAL VOLUME (In cubic feet) _____ NOTES:	
13. ANNUAL ACCUMULATION SERIES STILL CREATED? <input type="checkbox"/> Yes <input type="checkbox"/> No ANNUAL ACCUMULATION (in cubic feet) _____		14. ESTIMATED ACTIVITY PER FILE DRAWER For How Long? HIGH (Daily) _____ MEDIUM (Weekly to Monthly) _____ LOW (Less Than Once a Month) _____	
15. STATUS <input type="checkbox"/> RECORD COPY? <input type="checkbox"/> CONVENIENCE COPY? IS INFORMATION DUPLICATED ELSEWHERE? _____		16. PUBLIC ACCESS RESTRICTIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO LEGAL AUTHORITY _____	
17. RELEVANT STATUTES/REGULATIONS K.S.A. _____ K.A.R. _____ OTHER _____		18. RECOMMENDED RETENTION ACTIVE (in office) _____ INACTIVE (offsite) _____	19. RECOMMENDED FINAL DISPOSITION <input type="checkbox"/> DESTROY <input type="checkbox"/> ARCHIVES
20. VITAL RECORDS? <input type="checkbox"/> YES <input type="checkbox"/> NO	21. ADDITIONAL REMARKS:		
22. SURVEYOR'S NAME		23. TELEPHONE/EMAIL	24. DATE