



REQUEST FOR RECORDS DISPOSITION AUTHORITY (See Instructions on reverse)		LEAVE BLANK	
TO: GENERAL SERVICES ADMINISTRATION NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, DC 20408		JOB NO.	<i>N1-1589-2</i>
1. FROM (Agency or establishment) Veterans Administration		DATE RECEIVED	<i>12-21-89</i>
2. MAJOR SUBDIVISION Department of Veterans Benefits		NOTIFICATION TO AGENCY	
3. MINOR SUBDIVISION Central Office		In accordance with the provisions of 44 U.S.C. 3303a the disposal request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10. If no records are proposed for disposal, the signature of the Archivist is not required.	
4. NAME OF PERSON WITH WHOM TO CONFER Mr. Gordon Boone	5. TELEPHONE EXT. 233-3632	DATE <i>3/22/89</i>	ARCHIVIST OF THE UNITED STATES 
6. CERTIFICATE OF AGENCY REPRESENTATIVE			

I hereby certify that I am authorized to act for this agency in matters pertaining to the disposal of the agency's records; that the records proposed for disposal in this Request of 1 page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified; and that written concurrence from the General Accounting Office, if required under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies, is attached.

A. GAO concurrence: ☐ is attached; or ☒ is unnecessary.

B. DATE <i>12/15/88</i>	C. SIGNATURE OF AGENCY REPRESENTATIVE  LYNN H. COVINGTON	D. TITLE Director, Paperwork Management and Regulations Service	
7. ITEM NO.	8. DESCRIPTION OF ITEM (With Inclusive Dates or Retention Periods)	9. GRS OR SUPERSEDED JOB CITATION	10. ACTION TAKEN (NARS USE ONLY)
	VA Form 28-0521, Application for Certified Rehabilitation Counselor Maintenance <u>Disposition.</u> Destroy one year from the end of the calendar year in which the training took place.		<i>1 item</i>