



Information Security Oversight Office

National Archives and Records Administration

700 Pennsylvania Avenue, NW Washington, DC 20408



ISOO Notice 2009-02: Initial Instructions on the Use of the SF 715, “Declassification Review Tab”

October 10, 2008 (**Revised September 30, 2010**)

The Standard Form (SF) 715, “Declassification Review Tab,” is the only tab approved for use by agencies working with Federal records under the automatic declassification provisions of E.O. 13526, “Classified National Security Information.” Waivers may only be granted by the Director of the Information Security Oversight Office.

The SF 715 may be ordered by calling the General Service Administration’s Federal Acquisition Service on (800) 525-8027. Choose option 1 to order by credit card, or choose option 3 to order by requisition. The stock number for the SF 715 is: 7540-01-537-4689.

Please direct any questions regarding this ISOO notice to: isoo@nara.gov.

Part A: Recording of Information by the Primary Reviewing Agency. This is the top part of the tab, to be completed by the agency who conducts the initial review.

Part A DECLASSIFICATION REVIEW TAB	
1	TAB# _____
2	Primary Reviewing Agency _____
3	Review Date: _____
4	Declassify: <input type="checkbox"/>
5	Exempt: <input type="checkbox"/> 5(a) Reason _____
	5(b) Authority _____
6	New Date or Event: _____ _____
7	Exclude: <input type="checkbox"/> 7(a) Reason _____
8	Other Restriction(s) _____ _____
9	Refer To: _____ _____
10	Change Classification To: _____ _____
STANDARD FORM 715 (8/2005) Prescribed by NARA/ISOO 32 CFR Part 2003	

1. **Tab #:** This element is optional for agency reviewers. This can be left blank for NARA to complete upon processing. (Optional)
2. **Primary Reviewing Agency:** Enter the name or acronym for your agency. (Mandatory)
3. **Review Date:** This is the date your agency conducted the review and made a decision on the document. Use the format *YYYYMMDD*. (Mandatory)
4. **Declassify:** Check this box if your agency is declassifying your agency’s equity in the document and you are also referring the document to one or more agencies. (Note: if your agency has equity in the document, either this section or section No. 5 is mandatory.)
5. **Exempt:** Check this box if your agency is exempting your agency’s equity in the document. (Note: if your agency has equity in the document, either this section or section No. 4 is mandatory.)
- 5a. **Reason:** Enter the exemption code appropriate for the reason your agency is exempting the document from declassification. Use the exemption categories from E.O. 13526, Sec. 3.3(b)(1) to (9), “25X1” through “25X9”, and Sec. 3.3(h), “50X1-HUM,” “50X2-WMD,” “50X1” through “50X9”, or “75X1” through “75X9.” More than one exemption code may be entered, if appropriate. Your agency must have explicit approval to utilize the specific exemption which must be captured in your agency’s Interagency Security Classification

Appeals Panel (ISCAP)-approved declassification guide. (Mandatory, if you are exempting the document)

- 5b. **Authority:** Cite the section of your agency’s ISCAP-approved declassification guide that covers the information being exempted. (Mandatory, if you are exempting the document)
6. **New Date or Event:** Enter the new date or event that is specified in your agency’s ISCAP-approved declassification guide for that category of information. (Mandatory, if you are exempting the document)
7. **Exclude:** Check this box if you find marked RD/FRD in that document. Also indicate the Department of Energy (DOE) as a referral agency for RD/FRD documents. Do not check this box for “unmarked RD/FRD;” treat that type of information only as a referral to DOE. (Mandatory, if you are excluding the document)
- 7a. **Reason:** This will usually be the Atomic Energy Act of 1954, abbreviated “AEA 1954.” (Mandatory if you are excluding the document)
8. **Other Restrictions(s):** Some agencies, in addition to conducting declassification review, also screen records for other conditions that may affect the release of a document. If your agency is conducting this type of review, indicate your findings here. (Optional)
9. **Refer To:** Enter the common name or acronym for all agencies that have equity in this document. Include agencies for referral here even if your agency is exempting your own equity in this document from declassification or has identified the document as containing RD/FRD information. (Mandatory, if you are referring the document)
10. **Change Classification To:** If your agency wants to downgrade or upgrade the classification level of a document (but not declassify it), indicate that change and authority here. (Mandatory, if classification is downgraded or upgraded)

Part B: Recording of Information by a Secondary Reviewing Agency. This is the part of the tab that runs lengthwise along the tab, where agencies to whom the document has been referred record their decisions about their equity in the document.

Part B:							
1Action Agency	2Notification Date	3Action Date	4Declassify	5Exempt	5(a)Reason 5(b)Authority	6New Date or Event	7Additional Referrals Noted
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

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1. **Action Agency:** Enter the common name or acronym for your agency. (Mandatory)
2. **Notification Date:** This is the date that your agency was notified of the referral. (Mandatory)

3. **Action Date:** Enter the date your agency made a decision on the document. Use the format *YYYYMMDD*. (Mandatory)
4. **Declassify:** Check this box if your agency is declassifying your equity in this document. Also check this box if your agency received this referral, but has no equity in the document. (Mandatory, if you are not exempting your equity or you have no equity in the document)
5. **Exempt:** Check this box if your agency is exempting your equity in this document. (Mandatory, if you are not declassifying your equity in the document)
- 5a. **Reason:** Enter the exemption code for the reason your agency is exempting the document from declassification. Use the exemption categories from E.O. 13526, Sec. 3.3(b)(1) to (9) “25X1” through “25X9”, and Sec. 3.3(h), “50X1-HUM,” “50X2-WMD,” “50X1” through “50X9”, or “75X1” through “75X9.” More than one exemption code may be entered, if appropriate. Your agency must have explicit approval to utilize the specific exemption which must be captured in your agency’s ISCAP-approved declassification guide. If your agency received this referral but has no equity in the document, check the “Declassification” box and write “No Equity” in this field. (Mandatory, if you are exempting your equity in the document or if you have no equity in the document)
- 5b. **Authority:** Cite the section of your agency’s ISCAP-approved declassification guide that covers the information being exempted. (Mandatory, if you are exempting your equity in the document)
6. **New Date or Event:** Enter the new date or event that is specified in your ISCAP-approved declassification guide for that category of information. (Mandatory, if you are exempting your equity in the document)
7. **Additional Referrals Noted:** This option should be rarely used; the primary reviewing agency should have conducted a complete review and have identified all equities. Enter the common name or acronym for agencies holding equity in this document that have not already been listed as an equity-holder. (Optional)