

Advanced Copy

REQUEST FOR RECORDS DISPOSITION AUTHORITY <i>(See Instructions on reverse)</i>		LEAVE BLANK (NARA use only)	
TO: NATIONAL ARCHIVES and RECORDS ADMINISTRATION (NIR) WASHINGTON, DC 20408		JOB NUMBER N1-511-95-1	DATE RECEIVED 2-10-95
1. FROM (Agency or establishment) Department of Health and Human Services		NOTIFICATION TO AGENCY	
2. MAJOR SUBDIVISION Public Health Service		In accordance with the provisions of 44 U.S.C. 3303a the disposition request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10.	
3. MINOR SUBDIVISION Substance Abuse and Mental Health Service Administration			
4. NAME OF PERSON WITH WHOM TO CONFER Johanna Bonnelycke, PHS/RMO	5. TELEPHONE 123/95 301-443-4543	DATE 8/18/95	ARCHIVIST OF THE UNITED STATES <i>[Signature]</i>

6. AGENCY CERTIFICATION
I hereby certify that I am authorized to act for this agency in matters pertaining to the disposition of its records and that the records proposed for disposal on the attached _____ 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, under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies,

is not required; is attached; or has been requested.

DATE JAN 25 1995	SIGNATURE OF AGENCY REPRESENTATIVE <i>[Signature]</i> A Prentice Barnes, Sr..	TITLE DHHS Records Management Officer
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7. ITEM NO.	8. DESCRIPTION OF ITEM AND PROPOSED DISPOSITION	9. GRS OR SUPERSEDED JOB CITATION	10. ACTION TAKEN (NARA USE ONLY)
1.	<p>Refugee Mental Health Program (Cuban/Haitian) C. <u>Psychiatric Evaluation and Treatment Records</u></p> <p><u>Description:</u> These records are accumulated at the INS/PHS Evaluation Facility, Home and Relief Bldgs. ST. Elizabeths Campus, Washington, D.C. These records pertain to the evaluation and treatment of individuals detained by the U.S. Immigration and Naturalization Services, 1980-1995; services provided under the auspices of the U.S. Public Health Service.</p> <p><u>Disposition:</u> Release information only under Privacy Act (PA) or Freedom of Information Act (FOIA) regulations or under existing interagency agreement.</p> <p>Cut off records on termination of program (1995). Transfer inactive files to WNRC and destroy records when 75 years old, on termination of program. Transfer to the National Archives 75 years after termination of program.</p> <p><i>[Signature]</i> 1/20/95 Delores Q. Christie Date Records Management Officer, SAMHSA</p> <p><i>Copies sent to agency, NCF, NNT, NIA 8/31/95</i></p>		