



# Personnel File Request Form

To view or obtain information from your official personnel records, please make selection(s) below, and the appropriate Human Resources representative will respond to you **within 24-72 hours to confirm receipt of your request and schedule delivery of the information.**

**\*\*You must present photo ID for identification purposes.**

**Date Submitted:**

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Employee ID:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Department:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Please contact me by:**

Email  Phone

What would you like to do during your appointment?

View my entire Personnel File

Obtain a paper copy of my Personnel File - What specific information are you requesting?

Specify below:

### AUTHORIZATION OF EMPLOYEE:

By my signature below, I understand that I may not add, remove or revise any documents. I also certify that I have requested, reviewed and/or received a copy of my personnel file.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY: *To be completed by Human Resources Staff*

Date Request was received: \_\_\_\_\_ HR staff completing request: \_\_\_\_\_

Appointment date and time: \_\_\_\_\_

Date copies available: \_\_\_\_\_ Date employee notified: \_\_\_\_\_ Date copies picked up: \_\_\_\_\_ ID confirmed: **Y** **N**