

Personnel File Review Request Form

Section 1 (To be completed by the Employee)

Employee Name: _____

Building: _____ Telephone Extension: _____

I hereby request to view my personnel file. I understand that I must make an appointment and that I will only be allowed to review the file with a Human Resources staff member present. I also understand that I may request copies of documents within the file and that I will be responsible for any costs that may incur for copies that are deemed excessive.

Employee Signature: _____ Date: _____

*Once submitted, you will be contacted by a Human Resources representative to schedule your appointment viewing time.

Section 2 (To be completed by Human Resources)

Date Request Received:

Date and Time of Appointment:

Section 3 (To be completed by Employee and Human Resources at appointment)

Time of Arrival: _____ Time of Departure: _____

Notes and/or Copies Requested:

Human Resources Signature

Employee Signature

Section 4 (If Applicable)

Date Copies Completed:

Employee Signature to Acknowledge Receipt of Copies Requested

Date