

# Human Resources

## PERSONNEL FILE: INSPECTIONS/COPY REQUEST

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Employee/Former Employee Name: \_\_\_\_\_

I am requesting to:

- Inspect my personnel file
- Obtain a copy of my personnel file

I understand the following:

- If I am inspecting my personnel file, I may not add, remove or revise any documents.
- I may be required to reimburse the District for the actual cost of reproduction of my personnel file.
- If I am a former employee, I understand that I am limited to one request per year and I may be required to reimburse the District for any postal expenses related to my request.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Approved       Denied

\_\_\_\_\_  
Andrea D. Credille, Chief Personnel Officer

\_\_\_\_\_  
Date

### **To be completed by Human Resources:**

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Date request received: \_\_\_\_\_

Date of review of file with  
employee/representative: \_\_\_\_\_

Number of pages in  
file at time of review: \_\_\_\_\_

Date on which a copy of the  
personnel file was provided  
to the employee/representative: \_\_\_\_\_

\_\_\_\_\_  
HR Representative

\_\_\_\_\_  
Employee Signature

