



PERSONNEL FILE AND PAYROLL RECORD REQUEST

You have a right to review your personnel file. You may designate a representative to inspect or receive a copy of your file. However, you must provide _____ a written authorization for any designated representative to inspect or copy your file. _____ may take reasonable steps to verify the identity of any representative you have designated.

Your personnel file will be made available to you by the location no later than 30 calendar days from the date [insert name of location] receives your written request to inspect or copy the file, unless you/your representative and [insert name of location] mutually agree in writing to a date no later than 35 calendar days from receipt of the written request. During your review of the file, nothing may be removed or added. You do not have a right to unsupervised review of the file.

You do not have a right to review or copy the following:

- Privileged communications
- Records relating to the investigation of a possible criminal offense
- Confidential letters of reference
- Ratings, reports, or records that were:
 - Obtained prior to employment.
 - Prepared by identifiable examination or search committee members
 - Obtained in connection with a promotional examination

You also have a right to review your payroll records. Payroll records will be made available to you no later than 21 days after receipt of your written request.

If you request a copy of your personnel file or payroll records, you may be charged the actual cost of copying and mailing. Note that former employees are only entitled to one request per year and that any requests made by employees who have a pending claim against the location will be handled according to the procedures applicable to the nature of the claim.

I, _____, request the following:
PRINT NAME

- Review of my personnel file, including any medical, disciplinary, promotional records
- Review of my payroll records — for payroll period from _____ to _____ (dates)
- Copy of my personnel file, at the cost of _____ cents per page
- Copy of my payroll records, at the cost of _____ cents per page

I designate the following person as my authorized representative:

Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

Signature of employee: _____ Date: _____