

Document Request Form



Name: _____ **Phone #/Ext:** _____

Position: _____ **Building:** _____

Employee Signature: _____ Date: _____

You will be contacted by an Employee Services representative once your request has been filled and is ready for pick up.

I hereby request the following information from Employee Services:	
___ Copy of Transcripts	___ Highly Qualified Information
___ Clock Hour and/or Course Credit Report	___ Copy of Contract
___ Verification of Experience	___ Copy of West-E/Praxis Test
___ Other (please list):	
Copy request complete: _____ Intials: _____	

DocumentRequest/FileRequest 02/15 LS

Personnel File Review Request Form



Name: _____ **Phone #/Ext:** _____

Position: _____ **Building:** _____

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 an Employee Services staff member. I also understand that I may request copies of documents within the file and will be notified by Employee Services when the copies are ready for pick up.

Employee Signature: _____ Date: _____

Once submitted, you will be contacted by an Employee Services representative to schedule your viewing time.

For Employee Services Use Only	
FILE REVIEW DATE:	Date Request Received:
Copies requested of:	
Copy request complete:	
ES representative present when file is reviewed (initials): _____	

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