General Personnel

Exhibit - Request to Inspect Personnel File

1. Employe	e Name:	Social Security	/ Number	Date of This Request:
Department/Location:		Work Telephone or Extension		
I request an appointment with the Personnel Department to inspect my personnel file. The last day if reviewed my file was				
			-	Signature
2. Appointment Scheduled:				
Date		Time		Place
File review completed:				
			•	Date
3. Employee comments regarding accuracy of information in this file.				
				· ·
Personnel Representative Signature				Employee Signature
Ernployee:	Complete Section 1 of form and forward to Personnel Department.			
(June 1995)	Place copy of this	s form in Personn	el File following	inspection.