

ATTACHMENT 4

REQUEST FOR ACCESS TO PERSONNEL FILES

Employee Name _____

A photo identification and/or verification of authority may be required.

1. I request access to my official personnel folder or the documents listed in item 4.

Signature of Employee Date

2. I am an official representative of the above named employee and I request access to the employee's official personnel folder or the documents and reasons listed in item 4.

Signature of Representative Date

Print Representative's Name

3. I am a manager/supervisor and request access to the following documents maintained in the employee's OPF or the documents and reasons listed in item 4.

Signature of Manager/Supervisor Date

Print Name

4. Documents requested for review and reason for access.

Document Requested	Reason for Access

Access is APPROVED DISAPPROVED _____
Custodian of Records Date