

**ATTACHMENT 3**

**EMPLOYEE CERTIFICATION  
PRIVACY TRAINING**

Department of \_\_\_\_\_

I, \_\_\_\_\_ certify that I am authorized access to  
Print Name and Title

Official Personnel Folders and employment-related files and have received training on the location of these files; the requirement to physically secure these files; the confidentiality of materials within these files; the necessary authorizations required to access information within these files; and the procedures for the release of information from these files.

The date of training was \_\_\_\_\_.

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

\_\_\_\_\_  
Date

Acknowledged by \_\_\_\_\_  
Custodian of Records

\_\_\_\_\_  
Date