## Scottsboro City Schools

## Office of Human Resources

Mailing Address: Human Resources, Scottsboro City Schools, 305 S. Scott Street, Scottsboro, AL 35768 Phone: 256.218.2111 Fax: 256.218.2190

## PERSONNEL FILE ACCESS FORM

I. REQUEST AN APPOINTMENT	TO REVIEW P	ERSONNEL FILE
I,(printed name)		request to review my Personnel
File in the Office of Human Resources on	at (date)	(time)
II. REQUEST TO RECEIVE COPY OF SECTIONS OF PERSONNEL FILE		
I,	<b>,</b>	request a copy of the following
section(s) of my personnel file from the Office of Human Resources:		
I want to retrieve the documents from the Office	of Human Resou	arces on at (date) (time)
<b>Note</b> : This form must be submitted at least 24 hours prior to the date and time upon which you request access to and/or copies of your personnel file. Human Resources personnel will notify you via electronic mail of the time and date of your appointment to review your personnel file or the date upon which a copy of the file(s) will be available. Human Resources will endeavor to accommodate the appointment date and time identified on this form.		
Employee's Signature Da	te Emp	ployee's SCS Email Address
III. ACKNOWLEDGEMENT OF RECEIPT OF COPY OF PERSONNEL FILE OR SECTION(S) OF FILE		
I,	,	acknowledge that I received a
(printed name) copy of the following section(s) of my personnel file from the Office of Human Resources:		
Signature & Date Acknowledging Receipt of Documents:		
Office of Human Resources Use Only		
Request received: (date) Notificati	on via email of a	ppt. time: (date)
Human Resources Representative:		