



PERSONNEL RECORDS INSPECTION/ REQUEST FORM

Employee Name <i>(include any former names under which employment may have been held)</i>	Employee Status: <input type="checkbox"/> current employee <input type="checkbox"/> former employee
Request made by: <input type="checkbox"/> employee <input type="checkbox"/> authorized representative <i>(if authorized representative, representative must provide the employee's written authorization <u>or</u> the employee must sign the authorization below)</i>	Type of Request: <input type="checkbox"/> inspection only <input type="checkbox"/> copies only <input type="checkbox"/> inspection and copies

I understand that:

- If I request a representative, I must first provide a written request with valid identification. My representative, if any, must present my written authorization and valid identification in order to inspect or receive a copy of my personnel records.
- Tennessee Tech University may take reasonable steps to verify the identity of my authorized representative.
- This completed request form must be submitted to the Tennessee Tech University HR by email to theard@tntech.edu, in person at Derryberry Hall, Room 146 from 8am-4:30pm M-F; or by postal mail to: Tennessee Tech University Human Resources, One William L. Jones Drive, Derryberry Hall 146, P.O. Box 5132, Cookeville, TN 38505
- Tennessee Tech University may redact the names of any nonsupervisory employee from any records in my personnel records prior to inspection and/or copying.

I have received a copy of this request form. If applicable, I authorize _____ to inspect and/or copy my personnel records on my behalf. I understand that I must show my identification before my records will be shown to me.

Employee signature / printed name

Date of request

Employee's T # _____

For Tennessee Tech University HR use only:

Date of receipt of this request: _____

Name of person receiving this request: _____

Name of employer representative present at inspection / providing copies: _____

Name of individual inspecting / copying records: _____

If authorized representative, method by which identity of representative verified:

☐ Driver's license
 ☐ Photo identification card
 ☐ Other (describe): _____

Date of inspection and/or copying: _____

(Check one:)
 ☐ inspection only
 ☐ copy only
 ☐ inspection and copy