**Electronic Personnel File**

**Receipt Verification**

Complete this form to transfer electronic personnel files within and between agencies. The Sending Agency completes form and sends to the Receiving Agency for verification. Use PDF files only for short-term records. Use TIFF for both short-term and long-term imaged records. Do not use a CD for storage of personnel records.

The Sending Agency listed below maintains personnel records electronically. The enclosed CD or .Zip file contains the personnel records in both TIFF and PDF. These records have been zipped and password protected. The password has been communicated separately from this transfer file.

|  |  |
| --- | --- |
| **Sending Agency Information** | |
| Agency | Date |
| Contact | Phone |
| Email | Mail Stop/Mailing Address |

**Employee’s Name**:

**Personnel Number**:

|  |  |
| --- | --- |
| **Sent To (Receiving Agency)** | |
| Agency | |
| Contact | Phone |
| Email | Mail Stop/Mailing Address |

Do not transfer training records stored in the Learning Management System (LMS).

|  |  |  |  |
| --- | --- | --- | --- |
| **File Name(s)**  *(Example: Smith-1234567 Personnel File Performance 2012-12-06)* | **PDF** | **TIFF** | **# of Pages** |
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Complete section below, sign, and return form to Sending Agency. If you have questions or need assistance, contact the Sending Agency Contact listed above.

|  |  |  |
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| **Receiving Agency Information** | | |
| Contact | | Phone |
| Email | | Mail Stop/Mailing Address |
| **Acceptance Acknowledgement**  The signature below verifies the personnel records were received, accessible, and the number of files listed above matches the number of files received. I understand that upon receipt of this signed form, the Sending Agency will no longer retain a copy of these personnel records. | | |
| Date | Signature (required) | |