



Verification of Receipt Form For Employee Files

INSTRUCTIONS This form should be used by Texas A&M University departments/units to verify receipt of Texas A&M employees' official personnel files, confidential medical files, or other employee records. The files should be hand-delivered in sealed envelopes.

PLEASE TYPE OR PRINT

Employee File Name	
Releasing Department/Unit Name	Contact Person and Phone Number
Receiving Department/Unit Name	Contact Person and Phone Number
Please check all that apply: <input type="checkbox"/> Official Personnel File <input type="checkbox"/> Medical File <input type="checkbox"/> other, describe:	Please check all that apply: <input type="checkbox"/> Permanent Transfer of Files/Records <input type="checkbox"/> Temporary Transfer of Files/Records

Delivered by (Signature) _____

Date _____

Received by (Signature) _____

Date _____

<p>DISTRIBUTION: Original to Receiving Department Copy to Releasing Department</p>	<p>NEED HELP? Employee Relations Office (979) 862-4027 employee-relations@tamu.edu</p>
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