



Division of Human Resources  
**SCAN / COPY RECORDS REQUEST**

Date: \_\_\_\_\_

Request made by:     Phone     In Person     Email     US Mail

Please Print

Applicant Name: \_\_\_\_\_ Last 4 digits of SS#

OR

Employee Name: \_\_\_\_\_ Last 4 digits of SS#

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

I request the following documents to be scanned or copied:

- Reference(s)
- Transcript(s)
- High School Diploma
- Certificate(s)
- License(s)
- Resume
- Other: \_\_\_\_\_

Location of documents (*check box*)     Attached     Mailed direct to ACPS     In Personnel File

Applicant or Employee Signature (*if available*) \_\_\_\_\_

| <b>For Human Resources Office Use Only</b> |           |
|--|-----------|
| Date document(s) scanned: _____            | By: _____ |
| Date document(s) uploaded: _____           | By: _____ |
| Notes: _____                               |           |
| _____                                      |           |