

# HUMAN RESOURCES RECORDS REQUEST

STATE OF MAINE

BUREAU OF HUMAN RESOURCES

NAME OF REQUESTOR	DATE
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DEPARTMENT OR ORGANIZATION
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## NATURE OF REQUEST

<input type="checkbox"/> REVIEW APPLICATIONS FOR CANDIDATES ON A REGISTER
Job Class Title: _____ Code: _____

Check Out By: _____	Certification#: _____
Date & Time Out: _____	Returned: _____

<input type="checkbox"/> REVIEW JOB CLASSIFICATION FOLDER
Job Class Title: _____ Code: _____

Check Out By: _____	Certification#: _____
Date & Time Out: _____	Returned: _____