

Human Resources Document Request Form

Copy of Driver's License

Fax to: 660-827-8938
Sedalia School District #200
Human Resources
2806 Matthew Drive
Sedalia Mo 65301

Please include a copy of your driver's license for proof of identity.

Please Print the Following Information

Please suppl	y me with copies of the items checked below fr	om my personnel file.	
Date of Req	uest:/		
Employee Name:		Phone:	
	Teacher Certificate		
	Licensure		
	Transcripts		
	Professional Development Records		
	Summative Evaluations		
	Contract or Letter of Employment		
	Other		
	noice please:		
	– Address		_
☐ School N	Mail – School Name		_
□ Pick Up	at Central Office		
Employee S	ignature		
FOR HUMA	IN RESOURCES DEPT. USE ONLY:		
Date receive	ed:/ Processed by		
Date comple	eted:/ Supplied via: □ US M	ail □ School Mail □ Picked Up	/8/12 psm