

**VII-6.02 - POLICY ON EMPLOYEE FILES FOR NONEXEMPT AND EXEMPT STAFF EMPLOYEES**

(Approved by the USM Board of Regents on July 13, 2001; Amended October 9, 2015)

**I. PURPOSE AND APPLICABILITY**

This policy establishes responsibility for maintenance, access and control of employee files for all Nonexempt and Exempt Staff employees.

**II. DEFINITIONS AND SCOPE**

A. Employee File - A confidential business record and property of the institution that employs the Staff employee. The file, in electronic or paper format, consists of personal demographics and information relating to the individual's employment.

B. Contents of an Employee File

1. Employee files include but are not limited to the following:

a. Employment application and/or resume.

b. College transcripts.

c. Job descriptions.

d. Records relating to hiring, promotion, demotion, transfer, reassignment, layoff, compensation, education and training.

e. Letters of recognition.

f. Disciplinary documents.

g. Performance evaluations. And

h. Documents relating to separation from employment.

C. Medical Records shall be maintained in a separate file and are not part of an employee file.

**III. GENERAL**

A. Confidentiality

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All employee files are confidential and are to be secured accordingly. Anyone handling employee files shall maintain confidentiality of the material at all times, including during the course of file transmission electronically or via FAX or mail.

### **B. Responsibilities of the Office of Human Resources**

Employee files are secured in the Human Resources Department at each institution, or location designated by the Chief Human Resources Officer (CHRO).

1. All records to be included in employee files are prepared by or delivered directly to the Human Resources Department.
2. All filing, removal, re-filing and/or processing of data electronically of employee records is to be accomplished only by the Human Resources staff.
3. Records may not be removed from the Human Resources Department except by authorization from the Director of Human Resources or designee.

### **C. Retention of Files**

Institutions shall follow the record retention schedule prescribed by law.

## **IV. VERIFICATION OF EMPLOYMENT**

All requests for verification of employment for current or former employees are to be directed to the CHRO or designee. Non-confidential information such as dates of employment, position(s) held, and current salary may be released on request. Confidential information shall not be released unless the Human Resources Department is in receipt of a written release signed by the employee, court order, or subpoena.

## **V. ACCESS TO EMPLOYEE FILES**

### **A. Persons with Authorized Access**

The following persons have authorized access to individual employee files:

1. The Director of Human Resources or designee
2. The Employee
3. The employee's current supervisor or any individual within the organizational unit who is in the chain of authority above the employee or legal counsel to such person in that capacity.
4. Auditors (USM, Institution, Legislative auditors)

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5. An authorized agent for an employee who has written authorization signed by the employee for access to or disclosure of a confidential employee record.

### B. Employee Access

Employees shall have access to their own files and medical records during regular business hours and upon such reasonable prior notice as the Human Resources Department may require.

1. All files shall be reviewed in the presence of the Director of Human Resources or designee.
2. At the time of such review, the Director of Human Resources or designee may require the employee to initial and date all records in her/his file(s).
3. Employees who request copies of materials from their file(s) may be charged a scheduled fee.
4. An employee who objects to information in her/his file may place a statement to that effect in the file.

### **IMPLEMENTATION PROCEDURES:**

Each President shall identify his/her designee(s) as appropriate for this policy; develop procedures as necessary to implement this policy; communicate this policy and applicable procedures to his/her institutional community; and post it on its institutional website.