# IPW, INC.

## Employee Inquiry Sheet

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| Employee Inquiry Information | | | | | | |
| Date Requested: | |  | |  |  | |
| Employee Name: | |  | | Employee Number: |  | |
| E-Mail Address: | |  | | Phone/Extension: |  | |
|  | | | | | | |
| Inquiry Details | | | | | | |
| Complete the form and give it to the receptionist at the Human Resources department at your local office. All inquiries will be addressed within 48 hours of receipt.  Indicate your inquiry in the space provided below                                                                                                                                                                                                            ***NOTE***– Attach all supporting documentation. | | | | | | |
| For Human Resource Use Only | | | | | | |
|  | | | | | | |
| Date Replied: |  | |  | | | |
| HR Signature: |  | | | | | |
|  | | | | | | |
| Comments: | | | | | |