



CWA Local 7270

RELEASE of PERSONNEL, CORPORATE SECURITY AND/OR MEDICAL RECORDS

_____, the undersigned do hereby grant permission for all Union Representatives involved to examine, review and obtain copies, when necessary of any and all portions of my personnel and or medical records maintained by Frontier Communications, which, when necessary to process a grievance on my behalf.

I understand all information and disclosures of a personal nature pertaining to these records or copies will be held in strict confidence unless otherwise stated by me.

(Print Name)

Signature

Date

Grievance #