

XYZ Company
Drug Free Workplace Program

Employee Name _____

ID Number _____

DOCUMENTATION OF BASIS FOR REASONABLE SUSPICION TESTING

Prepare within 7 days after all testing for reasonable suspicion, give to employee upon request, and keep confidential for at least one year.

Date of testing for reasonable suspicion _____.

Circumstances, which existed to warrant the testing done for reasonable suspicion, were as follows:

- _____ A report of drug use, provided by a reliable and credible source, which has been independently corroborated.
- _____ Evidence that an individual has tampered with a drug test during his employment with the current employer.
- _____ Information that an employee has caused, contributed to, or been involved in an accident while at work.
- _____ Evidence that an employee has used, possessed, sold, solicited, or transferred drugs while working or while on the employer's premises or while operating the employer's vehicle, machinery or equipment.
- _____ Observable phenomena while at work, such as direct observation of drug use or of the physical symptoms or manifestations of being under the influence of a drug or alcohol.
- _____ Abnormal conduct or erratic behavior while at work or a significant deterioration in work performance.

Additional Comments:

Date

Employer Signature