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| --- |
| Name of employee: |
|  |
| Supervisor/Foreman Name: |
|  |
| Other Witnesses if any: |
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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **REASON FOR OBSERVED BEHAVIOR (REASONABLE CAUSE)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Actual use | □ |  | Odor detection  | □ |
| Abnormal behavior | □ |  | Possession of drugs | □ |
| Possession of alcohol | □ |  | Other: | □ |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  **EXPLAIN DETAILS**

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| --- |
| Signature of Supervisor/Foreman: |

| **Revision / Review History** |
| --- |
| **Revision** | **Date** | **Authorized By** | **Changes** |
| 1 | 12/12/2004 | Safety Director | Annual review |
| 1 | 12/3/2006 | Safety Director | Annual review |
| 2 | 6/6/2006 | Safety Director | Changes |
| 2 | 9/6/2007 | Safety Director | Annual review |
| 3 | 11/14/2007 | Safety Director | Changes |
| 3 | 11/14/2009 | Safety Director | Annual review |
| 3 | 7/13/2016 | Safety Director | Annual review |
| 3 | 6/30/2017 | Safety Director | Annual review |
| 3 | 4/18/2018 | Safety Director | Annual review |
| 3 | 6/7/2019 | Safety Director | Annual review |
|  |  |  |  |
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