



Corporate Management Group

OBSERVED BEHAVIOR REASONABLE SUSPICION RECORD

Reasonable suspicion determined for:  Alcohol  Drugs
Employee Name: Wendy Kingwelski
Address of occurrence:
City & State:
Date of occurrence: 12/13/2018 Time of occurrence: 11:15 AM

Record employee observed behavior for reasonable suspicion for the use of alcohol or controlled substances. The employer shall require the employee to submit to a controlled substance or alcohol test if a supervisor or company official determines that reasonable suspicion exists.

MARK ALL ITEMS THAT APPLY AND DESCRIBE SPECIFICS AS NEEDED

WALKING/BALANCE

- Stumbling, Swaying, Staggering, Unsteady, Falling, Rigid, Unable to stand, Holding on, Sagging at knees, Feet wide apart

SPEECH

- Shouting, Sturred, Whispering, Rambling, Slow, Incoherent, Slobbering

ACTIONS

- Resisting Communications, Fighting/insubordinate, Hyperactive, Insulting, Erratic, Drowsy, Hostile, Indifferent, Crying, Profanity, Threatening

EYES

- Bloodshot, Watery, Dilated pupils, Glassy, Restricted pupils, Droopy, Wearing sunglasses, Nystagmus

FACE

- Flushed, Pale, Sweaty

APPEARANCE/CLOTHING

- Disheveled, Having odor, Dirty, Messy, Partially dressed, Stains on clothing

BREATH

- Alcohol odor, Paint alcohol odor, No alcohol odor, Marijuana odor

MOVEMENTS

- Fumbling, Jerky, Slow, Nervous, Hyperactive

EATING/CHEWING

- Gum, Candy, Mints, Tobacco, Other N/A

OTHER OBSERVATIONS:

Did the employee admit to using drugs or alcohol? YES NO
When: How much:
Substances: Where taken:

WITNESSED BY:

Signature: Title:
Signature: Title:
Date Report was prepared: 12-13-18 Time report was prepared: