



Code No. 403.7- E6

DRUG AND ALCOHOL REASONABLE SUSPICION OBSERVATION

Employee's Name: _____

Date of Observation: _____

Time of Observation From: a.m./p.m. to a.m./p.m. _____

Location:

Observed personal behavior: (check all appropriate items)

Speech: Normal Incoherent Confused Loud

Slurred Whispering Silent Disruptive

Balance: Normal Swaying Staggering Falling

Walking and Turning: Normal Stumbling Swaying Falling

Arms raise for balance Reaching for support

Awareness: Normal Confused Paranoid Sleepy or stupor Lack of coordination

Odor: Normal Alcohol Burned Rope

Appearance: Red eyes Vomiting Half closed eyes

Comments:

Reasonable suspicion of current use or impaired by: Alcohol or Drugs Yes ___ No ___

Above behavior witnessed by: _____

Signed

Date

Signed (optional)

Date

This form must be completed by each trained employee observing the driver suspected of drug use and/or alcohol misuse by behavior, speech and/or odor while on duty, the earlier of within twenty-four hours of the determination of reasonable suspicion or prior to receiving the test results. The observations must be specific, contemporaneous and articulable concerning the appearance, behavior, speech and body odor of the driver.