Code No. 403.7E6

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 raised 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 _____ drugs.

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.

Approved 7-2003 Reviewed 4-2005 Revised 7-2003