

CITY OF LAREDO
REASONABLE SUSPICION OBSERVATION FORM
(STRICTLY CONFIDENTIAL)

(Please Print)

EMPLOYEE NAME: _____

LAST FOUR DIGITS OF SOCIAL SECURITY NO. _____

DATE & TIME OF INCIDENT: _____

NAME OF SUPERVISOR #1: _____

NAME OF SUPERVISOR #2: _____

This checklist is to be completed when an incident has occurred which provides reasonable suspicion that an employee is under the influence of drugs, alcohol and/or inhalants. The Supervisor(s) shall note, in writing, all pertinent behavior and physical signs or symptoms which lead him/her to reasonably believe that the employee has recently used or is under the influence of, a prohibited substance such as a drugs, alcohol and/or inhalants.

Mark each applicable item on this form and any additional facts or circumstances which you have noted.

A. NATURE OF THE INCIDENT/CAUSE FOR SUSPICION

1. Observed/reported possession or use of drugs, alcohol and/or inhalants or prohibited controlled substance.
2. Apparent use of drugs, inhalants and/or alcohol intoxication.
3. Observed abnormal or erratic behavior
4. Arrest or conviction for drug and/or alcohol or prohibited controlled substance related offense
5. Evidence of tampering on a previous drug test
6. Other (e.g., flagrant violation of safety regulations, serious misconduct, fighting or argumentative/abusive language, refusal of supervisor instruction, unauthorized absence on the job) (Please specify).

B. UNUSUAL BEHAVIOR

- 1. Verbal abusiveness
- 2. Physical abusiveness
- 3. Extreme aggressiveness or agitation
- 4. Withdrawal, depression, mood changes, or unresponsiveness
- 5. Inappropriate verbal response to questioning or instructions
- 6. Other erratic or inappropriate behavior (e.g., hallucinations, disorientation, excessive euphoria, confusion) Please specify.

C. PHYSICAL SIGNS OR SYMPTOMS

- 1. glassy or bloodshot eyes
- 2. slurred speech
- 3. impaired physical coordination and poor reflexes
- 4. abnormal , erratic, or bizarre behavior
- 5. unprovoked fighting or combative behavior
- 6. smell of alcohol on breath or smell of marijuana or smell of inhalant
- 7. unsteady gait
- 8. possession of drugs, alcohol or inhalant
- 9. admission of intoxication or being under the influence of illegal drugs, alcohol or inhalants while on the job
- 10. direct observation of drugs, alcohol or inhalant use

