

## Previous Employment Employee Alcohol and Drug Test Statement

Sec. 40.25(j) As the employer, you must also ask the employee whether he or she has tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which the employee applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years. If the employee admits that he or she had a positive test or a refusal to test, you must not use the employee to perform safety sensitive functions for you, until and unless the employee documents successful completion of the return-to-duty process (see paragraphs (b) (5) and (e) of this section).

Prospective Employee Printed Name:

Prospective Employee SS or ID Number:

Prospective Employee CDL Number and State of Issuance:

The prospective employee is required by Sec. 40.25U) to respond to the following questions.

<p>1. Have you tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years?</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<p>2. If you answered yes, can you provide/obtain proof that you've successfully completed the DOT return to duty requirements?</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO

I certify that the information provided on this document is true and correct.

Prospective Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Record retention guidelines:**

If "yes" to question 1, retain this form and documentation provided for 5 years.

If "no" to question 1, discard after employment terminates but not less than 2 years from date of date of statement