Notification of Random Selection – DOT

Participant Name: Joe Driver
Employee ID: ILXXXXXXXXXX
Location: ABC Company
Alternate ID: XXXXXX
Position: Driver
Populated Date: 1/12/20XX

Selected For Drug Testing: YES/NO
Selected for Alcohol Testing: YES/NO

You have been selected for random testing by a computerized random selection generator.

IF YOU HAVE BEEN SELECTED FOR A DRUG SCREEN (see above): You will need a Federal Custody and Control Form (CCF), or an eCCF Order Form, and will need to present it at the testing center.

IF YOU HAVE BEEN SELECTED FOR AN ALCOHOL TEST (see above), you MUST obtain an Authorization Form from your employer before appearing at the testing center. IF YOU ARE A DOT FMCSA OWNER-OPERATOR, please contact InOut Labs at 847-657-7900 to obtain your authorization.

IF YOU DO NOT PROVIDE PROPER DOCUMENTATION AT THE TESTING CENTER, and testing cannot be completed, you risk non-compliance with DOT regulations and the penalties associated therewith.

YOU WILL NEED THE FOLLOWING TO COMPLETE YOUR TESTING:
- Government issued photo ID
- Federal CCF or eCCF
- Authorization Form (for Breath Alcohol test)
- This notice

Please sign and date below to acknowledge receipt.

Participant Signature: _____
Date: _____ Time:_____