

Tear Out Sheet

Organization _____

Note: Each employer shall ensure that each employee signs a statement certifying that he/she has received a copy of the materials described in this document as per DOT Regulation. Each employer shall maintain the original of this signed certificate in the employee's qualification file and may provide a copy of this form to the employee. *Please refer to DOT 49 CFR Part §382.401 concerning the retention of records. We suggest you tear out this certificate and place it in the driver's qualification's file.*

What Every DOT Qualified Employee Should Receive From The Employer

- **The Organization's Statement of Policy** on Alcohol Misuse and Controlled Substance Use.
- **The Name of the Designated Employer Representative (DER)**, the individual that can answer questions concerning the company's drug & alcohol testing program.
- **The Driver Information Handbook** regarding the DOT/FMCSA 49 CFR Part§40 & Part§382 regulations on Controlled Substances, Alcohol Use, and Testing.

The above documents should fulfill the following DOT employee information requirements:

1. The identity of the person designated to answer employee's questions about these materials.
2. The categories of employee's who are subject to the provisions of this regulation.
3. Information on what period of the work day the employee is required to be in compliance with this regulation.
4. Specific information concerning the employee's conduct that is prohibited by this regulation.
5. The circumstances under which the employee will be tested for alcohol and/or controlled substances under the regulations.
6. The procedures that will be used to test for the presence of alcohol and controlled substances, protect the employee and the integrity of the testing processes, safeguard the validity of the test results, and ensure that those results are attributed to the correct employee.
7. The requirement that an employee must submit to alcohol and controlled substances tests administered in accordance with this regulation.
8. An explanation of what constitutes a refusal to submit to an alcohol or controlled substances test and the consequences.
9. The consequences for employees found to have violated the prohibitions of this regulation, including the requirement that the employee be removed immediately from safety-sensitive functions.
10. The consequences for employees found to have an alcohol concentration of 0.02 or greater but less than 0.04.
11. Information concerning the effects of alcohol and controlled substances use on an individual's health, work, and personal life; signs and symptoms of an alcohol or a controlled substances problem (the employee's or a co-worker's); and available methods of intervening when an alcohol or a controlled substances problem is suspected; including confrontation, referral to an employee assistance program, referral to management, and the return-to-duty process (if applicable).

I hereby certify that I have received, read and understand the materials listed above regarding the DOT/FMCSA 49 CFR Part§40 & Part§382 Regulations on Controlled Substances and Alcohol Use and Testing and all other applicable operating administration rules.

Employees's Name _____

Employee's Signature _____ Date _____

Trainer/Supervisor/ or DER Name _____

Signature of
Trainer/Supervisor/ or DER _____ Date _____

Title _____