Supervisor: Training Acknowledgement

Reasonable Suspicion**[[1]](#footnote-1)**

In accordance with USDOT Federal Transit Administration 49 CFR Part 655.14 (c), I hereby acknowledge that I have received at least 60-minutes of training on the physical, behavioral, and performance indicators of probable drug use and at least 60-minutes of training on the physical, behavioral, speech, and performance indicators of probable alcohol misuse.

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| --- | --- | --- |
| **Printed Name of Employee:** |  | |
| **Signature of Employee:** | |  | |
| **Date of Training:** |  | |

|  |  |  |
| --- | --- | --- |
| **Authorized Employer Representative:** |  | |
| **Signature:** | |  | |
| **Date:** |  | |

1. This form should be completed and kept in the employer’s drug and alcohol training records. Attach printed certificates from online or web-based training, as applicable. [↑](#footnote-ref-1)