



Drug Free Workplace

Lake County Board of County Commissioners

Reasonable Suspicion Drug Testing

Lake County
Office of Employee Services
P.O.Box 7800
315 W. Main St.
Tavares, FL 32778-7800
Tele (352) 343-9596
Fax (352) 343-9883

Designated Specimen Collection Site

Testing Date: _____

Expected Arrival Time: _____

Location: Express Care
2020 Nightingale Lane
Tavares, FL 32778
Phone: (352) 742-1500

The following employee will proceed to the designated specimen collection site within forty-five (45) minutes of this notification.

Employee will be required to present their County I.D. or Driver's License to the Drug Screen Coordinator along with this notification form.

Employee Name: _____
Department: _____
Job Title (CDL required): _____

Employee will submit to a drug and/or alcohol test for reasonable suspicion of drug and/or alcohol use/abuse.

- Drug** **Alcohol**

Drug Screen Coordinator Section

Have the Drug Screen Coordinator (or designee) complete the next section.

Arrival Time: _____ Print Name: _____

Departure Time: _____ Signature: _____

After reporting to testing facility for screening, employee shall present this completed notification to their supervisor, who will forward the form to the Office of Employee Services.