



Previous DOT Test Release of Information

Employee Name		Employee SSN	
I hereby authorize the release of information from my Department of Transportation regulated drug and alcohol testing records by my previous employer, listed in Section I-B to the employer listed in Section I-A. This release is in accordance with DOT Regulation 49 CFR Part 40, Section 40.25. I understand that information to be released in Section II-A by my previous employer, is limited to the following DOT regulated testing items: A. Alcohol tests with a result of 0.04 or higher B. Verified positive drug test C. Refusals to be tested D. Other violations of DOT agency drug and alcohol testing regulations E. Information obtained from previous employers of a drug and alcohol rule violation F. Documentation, if any, of completion of the return-to-duty process following a rule violation			
Employee Signature		Date	

Section I-A

New Employer	A&R Aviation Services, Inc		
Address	7915 Old Highway 99 SE		
City	Tumwater	State	WA
Phone #	360-236-9928 x 107	Zip	98501
Employee Representative	Kelley Hix HR@aravservices.com		

Section I-B

Previous Employer			
Address			
City		State	
Phone #		Zip	
Employee Representative			

Section II-A

To be completed by the previous employer and transmitted by mail or fax to the new employer:

While employed:	NO	YES
1. Did the employee have alcohol tests with results of 0.04 or higher?		
2. Did the employee have verified positive drug tests?		
3. Did the employee refuse to be tested?		
4. Did the employee have other violations of DOT agency drug and alcohol testing regulations?		
5. Did a previous employer report a drug and alcohol rule violation to you?		
6. If you answered "Yes" to any of the above items, did the employee complete the return-to-duty process?		

NOTE: If you answered "Yes" to item 5, you must provide the previous employer's report. If you answered "Yes" to item 6, you must also transmit the appropriate return-to-duty documentation (e.g., SAP reports, follow up testing record).

Section II-B

Name of Person providing information in Section II-A		Title	
Phone		Date	