

# DOT Drug and Alcohol Supervisor Reasonable Suspicion Training

Sponsored by AADT

## ARE YOU IN COMPLIANCE WITH THE DOT CFR 49 PART 382 REQUIREMENTS FOR DRUG & ALCOHOL SUPERVISOR REASONABLE SUSPICION TRAINING?



This class is designed for employer's/employees who supervise individuals that are involved in a safety-sensitive position, and are required to have a minimum of one hour of training on controlled substances and one hour on alcohol to aid on the recognition of the sign and symptoms of substance abuse. Not only does this class satisfy the DOT requirements, but it is a great training tool for any employer/ employee that supervises individuals in the workplace or those who want to refresh their training.

**Don't miss this opportunity....**

**Saturday and Sunday - September 24<sup>th</sup> and 25<sup>th</sup> 2016**

**Fresno Convention Center, Fresno, CA**

Classes are scheduled during the West American Truck Show

**Sat & Sun 1:00 PM to 3:00 PM**

Please arrive 15 min. before class schedule. No one will be admitted once the class begins.

**Pre-Register Now and Save!**

**\$69 - Early Bird Pricing before August 30th**

Classes will be an additional \$10 per person after August 30th and enrollment is subject to availability. Cancellation request must be received no later than 10 days prior to the class and are subject to a \$25 cancellation fee per person. No-shows are not eligible for a refund. Confirmation of enrollment including time and location will be sent to you 14 days prior to class date.

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## DOT DRUG & ALCOHOL SUPERVISOR REASONABLE SUSPICION TRAINING

AADT/WSTA Member \_\_\_\_\_ X \_\_\_\_\_ = Total \_\_\_\_\_  
Member ID: \_\_\_\_\_ (No. of Attend.) (Cost) (Grand Total)

**Payment:**  Check  Visa  MasterCard  AMEX CC No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp: \_\_\_\_\_

**Cardholder Name:** \_\_\_\_\_

All NSF checks returned are subject to a \$35 handling fee. For billing questions contact Dianna Webster - (909) 982-8409 Ext. 219

**Billing address for card:**

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Company Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(With my signature I am authorizing AADT to charge my credit card for the total fees due)

**Attendee Name(s):**

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Register by fax at (909) 608-2058 or mail to AADT 334 N. Euclid Ave, Upland CA 91786. If you would like additional information or have questions about our program, contact a AADT team member at (909) 982-8409 or online at aadrugtesting.com Unable to attend? AADT has Supervisor Training Video available for purchase, contact us for more information.

# HAVE YOU HAD YOUR SUPERVISORS TRAINED YET?

**IT IS REQUIRED UNDER DOT-FMCSA 49 CFR PART 382**

According to §382.603 Training for Supervisors - Every employer shall ensure that persons designated to determine whether reasonable suspicion exists. In order to require a driver to undergo testing under §382.603, they must receive at least 60 minutes of training on alcohol misuse and 60 minutes of training on controlled substance use. The training shall cover the physical, behavioral, speech and performance indicators of probable alcohol misuse and use of controlled substances.

## AADT SUPERVISOR TRAINING KIT

AADT offers a five part training program, where you will learn:



- The effect of drug and alcohol abuse in the workplace.
- Job performance behaviors that indicate the possible influence of drugs or alcohol.
- How to use constructive confrontation to address performance issues when drug or alcohol use is suspected.
- Details about drug and alcohol testing procedures.
- How to handle employee defense tactics, which are designed to deter you from initiating testing or disciplinary measures.

Upon completion of the training and passing our required quiz, the trainee will receive a certificate and will be authorized to initiate "Reasonable Suspicion" testing as defined in §382.307.

**All Kits Include:** DVD, 2 Leader Guides and a Program Quiz

**TO ORDER - COMPLETE AND RETURN THIS FORM TO:**  
 American Alliance Drug Testing • 334 N. Euclid Avenue • Upland, CA 91786-6031 or  
**Fax: 909-608-2058 / Email: cs@aadrugtesting.com**

### COMPANY INFORMATION

Company Name \_\_\_\_\_ ID# \_\_\_\_\_ (AADT CLIENTS ONLY)

Contact Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ (SUPERVISOR KITS ARE SHIPPED VIA UPS TO PHYSICAL ADDRESS AND PRIORITY MAIL TO P.O. BOX NUMBERS)

### ORDER INFORMATION

Please Select Type  VHS  DVD

Video Kit (Members Only) ..... \$99.00 X \_\_\_\_\_ = \$ \_\_\_\_\_

Video Kit (Non-Members) ..... \$120.00 X \_\_\_\_\_ = \$ \_\_\_\_\_

Additional Quiz & Certificate Kits ..... \$20.00 X \_\_\_\_\_ = \$ \_\_\_\_\_

\*AADT reserves the right to modify prices, service and programs without notice.

**\*Note: All sales are final, no refunds.**

**Total \$** \_\_\_\_\_

### PAYMENT

MasterCard  Visa  American Express  Discover  Cash  Check / Money Order # \_\_\_\_\_  
 (MAKE CHECKS OR MONEY ORDERS PAYABLE TO AADT)

Card No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date \_\_\_\_\_ / \_\_\_\_\_  
 Note: All NSF check returns will be subject to the service charge stated on the current AADT Price List & Consortium Agreement.

Card Holder Name \_\_\_\_\_  
 (Print name as it appears on credit card)

Signature **X** \_\_\_\_\_ Date \_\_\_\_\_  
 (With my signature I am authorizing AADT to charge my credit card for the total fees due)