



HUMAN RESOURCES DIVISION

190 Sailstar Drive NW, Cass Lake, MN 56633 • (218) 335-3698 Phone • (218) 335-3697 Fax • eap@llojibwe.net

Reasonable Suspicion & Reasonable Cause (Supervisor and above)

Employee Name: _____ Date: _____

Job Title: _____ Department: _____

Supervisor: _____ Job Site: _____

The following information pertains to the observed behavior from the employee.

Date of Observed Behavior: _____ Time of Observed Behavior: _____

Place of Observed Behavior: _____ Witness: _____

Appearance

- Sniffles/Nasal Secretion, Sleepy, Disheveled, Tremors/Twitches, Sores/Puncture Marks, Excessive Sweating, Flushed or Pale, Heavy Eyelids, Constricted Pupils, Dilated Pupils, Bloodshot/Glossy Eyes, Other (explain below)

Description/Notes: _____

Behavior/Demeanor

- Nervous, Irritable, Confused/Inattentive, Erratic, Paranoid, Combative, Mood Swings, Verbally/Physically Abusive, Fatigue/Sleeping/Drowsiness, Lethargic, Highly Excited, Other (explain below)

Description/Notes: _____

Motor Skills

- Normal, Unsteady, Swaying, Lack of Coordination, Falling, Fidgety, Unbalanced, Stumbling, Reduced/Fast Reaction Time, Other (explain below)

Description/Notes: _____

Speech

- Rambling, Exaggerated, Slurred, Talking Excessively, Loud, Whispering, Drooling, Dry Mouth, Other (explain below)

Description/Notes: _____

Odor

- Smell of Alcohol Excessive Cologne Body Odor Smell of Marijuana & other contributing factors

Description/Notes: _____

Other

Please explain: _____

Determining Reasonable Suspicion and Reasonable Cause

If you are able to document any of the indicators above, answer these questions:

- Yes No Are observations current, today and now?
- Yes No Does the impairment result from the possible use of drugs or alcohol?
- Yes No Did you witness the situation personally?
- Yes No Are facts capable of explanation?
- Yes No Are facts capable of documentation?
- Yes No Has some form of impairment been shown in the employee's appearance, actions or work performance?

Supervisor Signature: _____ Date: _____

HUMAN RESOURCES USE ONLY	
Action Taken	
<input type="checkbox"/> Reasonable Suspicion/Cause established; proceed with testing.	
<input type="checkbox"/> Reasonable Suspicion/Cause NOT established: _____	

<input type="checkbox"/> Employee refused to test: Immediately terminated per LLBO GAPP 100.13a	
HR Name: _____	Title: _____
HR Signature: _____	Date: _____

TESTER USE ONLY	
Test Conducted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Description/Notes _____	

Tester Signature: _____	Date: _____
Sent out for further testing? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Second Verifier Signature: _____	Date: _____

Reasonable Suspicion/Cause Instructions:

- Fill out Reasonable Suspicion/Cause Form
- Send to Employee Relations: eap@llojibwe.net
- Once approved by EA, call to schedule the drug test for employee
- The direct supervisor (*or designated person*) are responsible for transporting the employee to the testing site
- Do not allow employee to consume any food or liquids prior to testing!!!
- If the employee tests NON-NEGATIVE, the direct supervisor (*or designated person*) are responsible for getting the employee home safely; follow LLOB GAPP 100.13
- If employee tests negative, they may immediately return to work per LLOB GAPP 100.13

To schedule a drug test, please contact the following:

Cedar Lakes Casino

Colleen Zea, EMT Supervisor
Office: 218-335-7009 Cell: 218-766-6401 Fax: 218-335-7070
Colleen.zea@cedarlakescasino.com

On Duty EMT
Office: 218-335-7063 Other Test Office: 218-335-7013 On Duty EMS cell 218-308-4933
leahrother@northernlightscasino.com jessica.rock@cedarlakescasino.com
steve.frazer@cedarlakescasino.com brady.booge@cedarlakescasino.com
Kaitlin.connolly@cedarlakescasino.com Theresa.kesick@cedarlakescasino.com

Northern Lights Casino

Tracy Iliff, EMT Supervisor
Office: 218-335-3113 Cell: 218-556-4287 Fax: 218-3353534
Tracy.iliff@leechlakegaming.com

On Duty EMT
Office: 218-335-3116 Cell: 218-308-4321
NLC.EMT@northernlightscasino.com (*Will go to all EMS at NLC*)
Jacqueline.blue@leechlakegaming.com

White Oak Casino

Aaron Oothoudt, EMT Supervisor
Office: 218-335-4352 Cell: 218-766-9350 Fax: 218-335-4353
On duty EMS Cell: 218-308-4691
Aaron.oothoudt@northernlightscasino.com Colton.seelye@cedarlakescasino.com
Dana.rabbit@northernlightscasino.com

Health and Safety

Leona Howard, EMS Manager Rocky Papasodora, Health and Safety Officer
Office: 218-335-7063 Office: 218-335-7504
Cell: 218-766-1302 Cell: 218-766-0032

healthandsafety@leechlakegaming.com

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