

# Last Chance Agreement

Drug & Alcohol Policy Violation - Termination Alternative

## EMPLOYEE INFORMATION

Employee's Name: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

Date of Violation: \_\_\_\_\_

## EMPLOYEE ACKNOWLEDGEMENT & AGREEMENT

The above-mentioned employee acknowledges and agrees that their willful violation of the Company's Drug Prevention & Employee Testing Policy should have resulted in their immediate termination of employment. However, the above employee has requested that the employer reconsider their right to terminate, in exchange for the employee's promises and written guarantees to the following terms of continued employment.

**As the violating employee, I agree to all the following terms & conditions of continued "at-will" employment:**

- I will be immediately removed from all "Safety-Sensitive" and "Safety-Related" job functions, for no less than seven (7) calendar days. The employer may extend this removal for up to 30 additional calendar days, if needed.
- I will be required to locate and pay for my own Substance Abuse Professional (SAP), within the next 7 calendar days, and arrange for an initial & follow-up assessment. An acceptable SAP can be found at: [www.saplist.com](http://www.saplist.com).
- In addition to the S.A.P. requirements, I understand that I can also seek additional free self-help and support by calling 1-800-662-HELP. Free drug prevention materials, telephone support and free treatment referrals offered.
- I agree to cause the S.A.P. to deliver my personal Return to Work Authorization, Follow-Up Treatment Plan and Follow-Up Test Schedule direct to my employer and to FORENSIC Drug Testing Services, Inc. At: [info@fdtsi.com](mailto:info@fdtsi.com)
- I understand & agree that I may NOT return to work for the above company, until I provide the Company with a written "Return to Work Authorization" document, signed by a qualified Substance Abuse Professional (SAP).
- I understand & agree to follow the Substance Abuse Professional's (S.A.P.) written "Follow-Up Testing Schedule" and provide all Return to Duty & Follow-Up Testing under same-gender Direct Observation.
- I understand & agree that the company may require additional testing, under its own authority, such as Hair, Urine, Saliva, Breath, Ocular Impairment testing or any combination of testing needed to ensure my continued "drug-free" status.
- I understand & agree that I will be terminated should I attempt to defeat the sample collection or testing of my Return to Duty, Follow-Up or any other company directed testing event.
- I understand & agree should my Return to Duty, Follow-Up, Random or any other testing event be reported by FDTSI as "Positive", "Refusal", "No Show", "Invalid" or anything other than "Negative", I will be terminated.
- Finally, I understand & agree, should I fail to complete any of the above tasks, or violate any written policy or directive of the employer, within the next 60 months, I may be immediately terminated from employment.

## EMPLOYEE ACKNOWLEDGEMENT

***I acknowledge and accept that, on the above listed violation date, I knowingly violated my employer's written substance abuse policy. I agree that, based on the seriousness of my violation, I should be terminated. However, I feel I can stop my irresistible compulsion to consume intoxicants, if I'm given this last chance opportunity. As such, I agree to adhere to all the above listed terms and conditions of my continued employment, and I agree to remain drug & alcohol free for the full duration of my employment.***

Consenting Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Accepting Employer: \_\_\_\_\_ Date: \_\_\_\_\_

Federal Motor Carrier Safety Administration

# DRUG & ALCOHOL CLEARINGHOUSE

Are you prohibited from operating a commercial motor vehicle (CMV) due to a drug and alcohol program violation?



**FORENSIC**  
DRUG TESTING SERVICES, Inc.  
73-700 Dinah Shore, B206, Palm Desert, CA 92211



Complete the return-to-duty process—[here's how](#).

A driver with a drug and alcohol program violation is prohibited from performing safety-sensitive functions, including operating CMVs, for any DOT-regulated employer until the return-to-duty process is complete.

**By November 18, 2024**, as part of new Federal regulations, drivers with a “prohibited” status in the Drug and Alcohol Clearinghouse will lose or be denied their State-issued commercial driving privileges.



## How do I complete the return-to-duty process and get back to being “not prohibited”?

The return-to-duty process is established by 49 CFR part 40, subpart O. A summary is below.

### Select a Substance Abuse Professional

- ▶ Your employer is required to provide you with a list of DOT-qualified Substance Abuse Professionals (SAPs). You select your SAP based on your own research.
- ▶ Your designated SAP will evaluate you and provide recommendations for education/treatment.
- ▶ Your SAP will determine if you have successfully completed the education/treatment, therefore making you eligible for your return-to-duty test.

### Take the return-to-duty test

- ▶ You must be sent by your employer; only DOT-regulated employers, and not the employee, request the return-to-duty test. If you are an owner-operator, your designated consortium/third-party administrator (C/TPA) must send you for this test.

### Once your Clearinghouse status is “not prohibited,” you are eligible to resume performing safety-sensitive functions.

- ▶ Your status will be updated when your employer enters your negative return-to-duty test result in the Clearinghouse.
- ▶ To remain in a “not prohibited” status, your employer must complete the follow-up testing plan with you as specified by the SAP, which must include a minimum of six unannounced follow-up tests in the first 12 months of returning to performing safety-sensitive functions. If you are an owner-operator, your designated C/TPA must complete your follow-up testing plan.

Information about your drug and alcohol program violation is retained in the Clearinghouse for five years from the date of the violation determination or until the successful completion of the follow-up testing plan, whichever is later.

**For more information, log in to your Clearinghouse account. To register, visit <https://clearinghouse.fmcsa.dot.gov/register>.**



U.S. Department of Transportation  
Federal Motor Carrier Safety Administration

Employers, or their designated consortia/third-party administrators (C/TPAs), and substance abuse professionals (SAPs) must now report select parts of the return-to-duty (RTD) process in the Clearinghouse, within specific time frames. This reported information will update the driver's view of their RTD status (see right).

### RETURN-TO-DUTY STATUS



### Information must be reported in the Clearinghouse within required time frames:



**Employers (or their designated C/TPAs)** must report violation information by the **close of the third business day** following the date on which they obtained the information.



**SAPs** must report the date of completion of an initial SAP assessment and the date of determination of eligibility for RTD testing, by the **close of the business day** following the assessment or determination.

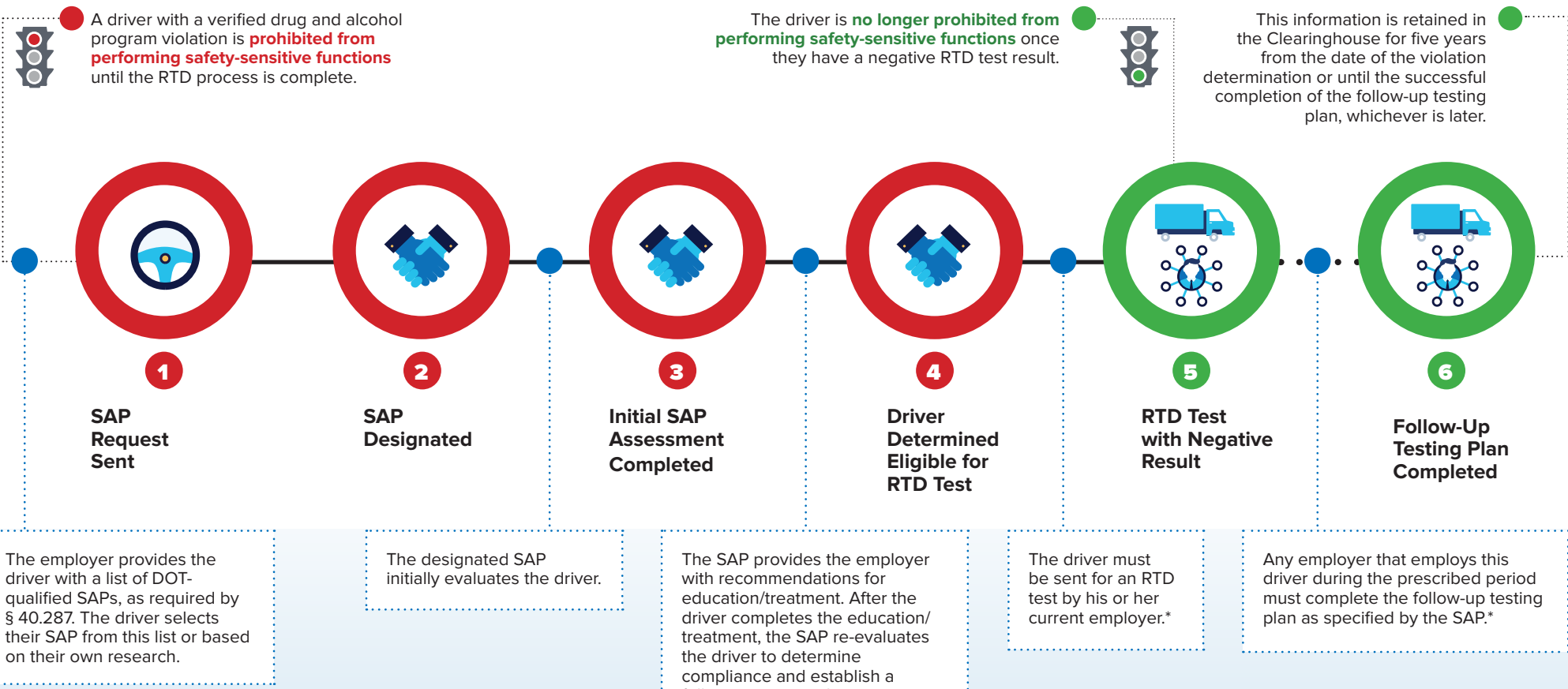


**NOTE:** The steps of the RTD process must be completed in the order listed above to be properly recorded in the Clearinghouse. Reporting this information within the mandated time frames is critical to ensuring that the driver's Clearinghouse status is kept up-to-date.

# How does the Clearinghouse fit into the RTD process?

The return-to-duty (RTD) process outlined in Part 40 Subpart O has not changed. The graphic below illustrates how the reporting requirements detailed in § 382.705 fit into this process.

LEGEND	
	Driver
	Employer
	SAP
	C/TPA
	RTD steps not recorded in the Clearinghouse



\*In the case of an owner-operator, these steps must be completed by a designated C/TPA.