MUST BRING PHOTO ID TO COLLECTION SITE
TEST WILL NOT BE PERFORMED WITHOUT PHOTO ID

DRUG TEST NOTICE

Employer: Weakley County Highway Dept

Employee Name/SSN: _____

REQUIRED TEST (S)

DOT Drug Test ☐

Breath Alcohol Test ☐

Physical ☐

Reason for Test:
☐ Pre-employment ☐ Random ☐ Post-Accident ☐ Return to Duty ☐ Follow-Up
☐ Reasonable Suspicion

Collection Site: Job World, Inc.
701 Reelfoot Ave, Ste 600
Union City, TN 38261

Appt. Date: _____

DER Name and phone #: _____ ( ) _____

In compliance with your Drug Free Workplace Policy and the TN Drug Free Workplace Program you are asked to submit a test of your urine and your breath (when requested), for the presence of controlled substances or alcohol.

Bring this notice with you to the collection site!

- Please report promptly to the collection site listed above at the time indicated to provide a fresh urine specimen (and breath specimen when requested).
- You must bring photo identification with you.
- Allow approximately 30-60 minutes for the collection procedure(s).

Certified Lab: ATN Laboratory
3560 Air Center Cove
Memphis, TN 38118
888-222-4894

MRO: Dr. Alfred Baldera, M.D.
TSIME
110 Sunset Acres Drive
Louisa, KY 41230
606-673-1007

Time Sent: _____
Time Arrived: _____
Time Completed: _____