



PRIORITY ONE

EMPLOYMENT SERVICES

Direct: 520.682.4005 Fax: 520.616.4536

COMPANY NAME: _____

Applicant/Employee

You are required to report for Drug Testing/Fingerprinting to one of the addresses listed below.

Report for drug testing on or before the date and time indicated below.

Your specimen will not be collected after the cutoff time/date.

Donor must bring picture ID (i.e., driver's license, State issued ID, Military ID, or passport).

APPLICANT/EMPLOYEE

Donor's Name: _____

Photo ID # or Company ID# _____ Cut Off Date: _____ Time: _____

***REASON: (select one)**

☐ Pre-employment ☐ Random ☐ Post Accident ☐ Cause/ Suspicion ☐ Follow Up ☐ RTD

☐ OTHER: _____

SERVICES TO BE PERFORMED:

☐ Instant Drug Test: 5 Panel

☐ Lab Drug Test: 5 Panel

☐ Hair Drug Test: Ext. Opi

☐ DOT Drug Test

☐ Instant Drug Test: 10 Panel

☐ Lab Drug Test: 10 Panel

☐ Hair Drug Test: 5 Panel

☐ Breath Alcohol Test

☐ Other: _____

☐ Fingerprint

☐ Hearing Test

☐ Spirometry

☐ Respirator Fit Test

☐ Lead/ZPP

☐ Vision Test

☐ Physical (BY APPOINTMENT ONLY) Please Call Office

BACKGROUND SEARCHES

☐ National Criminal Search/SSN

☐ Unlimited County Search

☐ Single County _____

☐ State Motor Vehicle _____

☐ Federal District _____

☐ Other _____

HOURS AND LOCATIONS

Westside (Grant & Fairview)

904 W Grant Road

Tucson, AZ 85705

Monday - Friday 8:00 AM to 4:30 PM Closed

12:00 PM to 1:00 PM for lunch

Eastside (5th & Rosemont)

5102 E 5th Street

Tucson, AZ ,85711

Monday - Thursday 8:00 AM to 4:30 PM

Friday - 8:00 AM to 12:30 PM

No quantitative RFT at this location

Authorized by: _____

Title: _____

Phone # _____

Date: _____