



**Conspire!**<sup>TM</sup>  
 before you hire  
 www.conspire2hire.com

**Conspire!**  
 1495 Garden of the Gods Rd.  
 Colorado Springs, CO 80907  
 (719) 260-1128

REQUEST FOR DRUG SCREEN AND/OR ALCOHOL TEST DONOR **MUST PROVIDE A VALID PICTURE I.D.** OR BE ACCOMPANIED BY AN EMPLOYEE REPRESENTATIVE.  
 IF YOU ARE HAVING A DOT TEST, **BE PREPARED TO STAY UNTIL SPECIMEN HAS BEEN PROVIDED.** (PER DOT RULES & REGULATIONS THERE IS A 3 HOUR MAXIMUM)

Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

**CHECK APPROPRIATE BOXES:**

**DRUG SCREEN**

- DOT DRUG TEST
- NON-DOT DRUG TEST
- QUICK KIT (5 PANEL OR 10 PANEL)
- HAIR
- COLLECTION

**ALCOHOL TEST**

- DOT BREATH ALCOHOL
- NON-DOT BREATH ALCOHOL
- CONFIRMATION IF NECESSARY

**PURPOSE**

- PRE-EMPLOYMENT
- REASONABLE CAUSE
- ANNUAL
- RANDOM
- RETURN DUTY
- POST-ACCIDENT
- FOLLOW UP

Company \_\_\_\_\_

- DONOR PAYS
- BILL COMPANY

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

Print Name \_\_\_\_\_

**Monday thru Friday, 8:00 a.m. to 5:00 p.m.**

**BEFORE AND AFTER HOUR COLLECTIONS BY APPOINTMENT  
 CALL FOR ADDITIONAL COLLECTION SITES IN AND OUT OF STATE**

