**EMPLOYER NAME/LOGO**

**Acknowledgement of Reasonable Suspicion**

**Training for Supervisors**

In accordance with Federal Transit Administration (FTA) Rule 49 CFR Part 655.14(b), I acknowledge that I have received at least 60 minutes of training on the physical, behavioral, and performance indicators of probable drug use, and at least 60 minutes of training on the physical, behavioral, speech, and performance indicators of probable alcohol misuse.

**(Print Name) (Signature) (Date)**