



Formal Supervisory Referral to the EAP

Date of Referral:

Employee Name Title Date of Birth

Referred by Title Phone.

REASONS FOR REFERRAL

- Tested positive for drugs or alcohol
- Attendance problems (explain):
- Unacceptable conduct (List disciplinary actions within the past year):

JOB PERFORMANCE (Explain in Detail in Attached Synopsis Document)

- Low Quality of Work Missed Deadlines Excessive Errors Erratic Work Patterns
- Poor Judgment Decreased Productivity Lack of Concentration
- Other (please describe):

BEHAVIOR ON THE JOB (Explain in Detail in Attached Synopsis Document)

- Avoids Supervisor/Co-Workers Unusually Critical of Others Disregards Safety
- Does Not Communicate Lacks Interest/Enthusiasm Frequent Mood Changes
- Unusually Sensitive to Criticism Grooming/Appearance Problems
- Other (please describe):

CONDITIONS FOR CONTINUED EMPLOYMENT

Are there conditions for continued employment? Yes No

If yes, describe these conditions (What behavior must be observed, or What actions must take place?):

Is disciplinary action likely? Yes No

Is the safety of this employee or other employees a concern? Yes No

If yes, please describe the concern:

Has the above information been discussed with employee? Yes (Date:) No

Employee's Signature: _____

Supervisor / HR Signature: _____

Please attach additional documentation (including a narrative synopsis and any relevant test results) that may help NuVantage better assist the employee.

Please call NuVantage (800.577.4727) if you have any questions or need assistance in completing this form.