



Discharge: Under the Influence of Intoxicants

Please answer all questions below. Any questions left unanswered will not be considered when determining your eligibility for Unemployment Insurance.

Claimant Name: _____ Last 4 Digits of Claimant's Social Security #: _____

Date completed Questionnaire: _____

Claimant Statement

1. What was your last physical date of work (mm/dd/yyyy)? _____

2. When were you fired/discharged (mm/dd/yyyy)? _____

3. Who discharged you?

Name: _____

Title: _____

4. What specific reason did the employer give you for being discharged?

5. Were you under the influence of intoxicants at work? YES NO

If yes, why were you under the influence of intoxicants? _____

If yes, when had you last used an intoxicant prior to your discharge?

If no, why does your employer feel that you were under the influence of intoxicants?

6. Were you tested for intoxicants? YES NO

If yes, when was the test conducted and what was the result?

7. Does the company have a policy regarding being under the influence of intoxicants at work? YES NO

If yes, were you aware of this policy? YES NO

If yes, what is your understanding of this policy?

How were you notified of the policy?

Bulletin Board Email Handbook/Handout Verbally Video Not Informed

8. Were there any witnesses to your alleged incident of intoxication? YES NO

If yes, who witnessed this?

Name: _____

Title: _____

9. Have you entered a drug/alcohol rehabilitation program? YES NO

If yes, when did you enter the program (mm/dd/yyyy)? _____

If yes, when did you leave the program (mm/dd/yyyy)? _____

If yes, did you complete the program? YES NO

10. Has a medical professional diagnosed you with a drug or alcohol addiction? YES NO

Note: If yes, please provide a medical note from your doctor indicating this.

11. Has there been any other prior incident or incidents of this nature at work? YES NO

If yes, please provide specific details and dates:

If yes, were you previously warned for the incident(s)? YES NO

If yes, provide date of warning (mm/dd/yyyy): _____

i) Type of Warning: Verbal Written Final

ii) Provide details of last warning:

iii) Name and title of person who issued the last warning:

Name: _____

Title: _____

12. Provide details of any other warnings you were issued. Include the dates and the name of the individual(s) who issued the warning(s). If you did not have any prior warnings, indicate "None".

13. Enter any additional information you feel may be necessary:

I hereby certify that, to the best of my knowledge and belief, the information I have provided is true.

YES NO

Signature: _____ Date: _____

English

Important! This document contains **important information** about your rights, responsibilities and/or benefits. It is critical that you understand the information in this document, and we will provide the information in your preferred language at no cost to you. **Call (401) 415-6772** for assistance in the translation and understanding of the information in this document.

American Sign Language

Important! Please visit here for ASL version of this document: https://www.youtube.com/channel/UCQuwufqdfDDY3cLU3nyH_w/videos

Spanish / Español

¡Importante! Este documento contiene **información importante** sobre sus derechos, responsabilidades y/o beneficios. Es importante que usted entienda la información en este documento. Nosotros le podemos ofrecer la información en el idioma de su preferencia sin costo alguno para usted. **Llame al (401) 415-6772** para pedir asistencia en traducir y entender la información en este documento.

Chinese - Traditional / 繁體中文

重要須知! 本文件包含 **重要資訊**, 事關您的權利、責任, 和/或福利。請您務必理解本文件所含資訊, 而我們也將使用您偏好的語言, 無償為您提供資訊。請致電 **(401) 415-6772** 洽詢翻譯及理解本文件資訊方面的協助。

Vietnamese / Việt

Lưu ý quan trọng! Tài liệu này chứa **thông tin quan trọng** về quyền hạn, trách nhiệm và/ hoặc quyền lợi của quý vị. Việc hiểu rõ thông tin trong tài liệu này là rất quan trọng, và chúng tôi sẽ cung cấp miễn phí cho quý vị thông tin này bằng ngôn ngữ mà quý vị ưa dùng. **Hãy gọi (401) 415-6772** để được hỗ trợ về việc thông dịch và hiểu thông tin trong tài liệu này.

Tagalog / Tagalog

Mahalaga! Naglalaman ang dokumentong ito ng **mahalagang impormasyon** tungkol sa iyong mga karapatan, responsibilidad at/o benepisyo. Napakahalaga na nauunawaan mo ang impormasyong nakapaloob sa dokumentong ito, at ibibigay namin nang libre ang impormasyon sa pinili mong wika. **Tumawag sa (401) 415-6772** upang humingi ng tulong sa pagsasaling-wika at pag-unawa sa impormasyong nasa dokumentong ito.

Arabic / العربية

مهم! يحتوي هذا المستند على معلومات مهمة حول حقوقك ومسؤولياتك وأوفوائتك. من الأهمية بمكان فهم المعلومات الواردة في هذا المستند، وسنوفر المعلومات بلغتك المفضلة دون تحميلك أي تكلفة. اتصل على الرقم للحصول على مساعدة في ترجمة المعلومات الواردة في (401) 415-6772 هذا المستند وفهمها.

French / Français

Important ! Ce document contient **des informations importantes** sur vos droits, vos responsabilités et/ou vos allocations. Il est essentiel que vous compreniez les informations contenues dans ce document, et nous vous fournirons gratuitement ces informations dans la langue de votre choix. **Appelez le (401) 415-6772** pour obtenir de l'aide pour traduire et comprendre les informations contenues dans ce document.

Haitian Creole / Kreyòl Ayisyen

Enpòtan! Dokiman sa a gen **enfòmasyon enpòtan** ladan konsènan dwa, responsablite ak/oswa avantaj ou yo. Li ap vrèman enpòtan pou ou konprann enfòmasyon yo ki nan dokiman sa a, epi n ap ba ou enfòmasyon sa yo nan lang ou prefere a gratis. **Rele (401) 415-6772** pou jwenn asistans pou tradui ak pou konprann enfòmasyon ki nan dokiman sa a.

Portuguese / Português

Importante! Este documento contém **informações importantes** sobre os seus direitos, responsabilidades e/ou benefícios. É essencial que compreenda as informações constantes neste documento, as quais disponibilizaremos, gratuitamente, na língua à sua escolha. **Contacte o número (401) 415-6772** para solicitar ajuda para traduzir e compreender as informações contidas neste documento.

Russian / русский

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Korean / 한국어

중요! 본 문서는 귀하의 권리, 책임 및/또는 이익에 관한 **중요한 정보**를 포함하고 있습니다. 귀하가 본 문서에 있는 정보를 이해하는 것은 대단히 중요하며, 귀하가 원하는 언어로 정보를 제공받으실 수 있습니다. **(401) 415-6772 로 전화**하여 본 문서에 있는 정보의 번역 및 이해를 위해 도움받으시길 바랍니다.