

FORM 105

**EMPLOYER'S STATEMENT WITH RESPECT TO ADVERSE
ACTION FOLLOWING A POLYGRAPH TEST
OR
THE REFUSAL TO TAKE A POLYGRAPH TEST**

* * * * *

Employer's Name: _____

Business Address: _____

Street

City

State

Zip

* * * * *

Employee's Name: _____

Address of location where Employee is employed:

Street

City

State

Zip

1. Date of interview: _____

2. Place of interview: _____

3. Time period of interview: Beginning: _____ End: _____

4. Name of Interviewer: _____

5. If Employee took a polygraph test:

A) Date polygraph test administered: _____

B) Name of polygraph examiner and firm: _____

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C) Date of polygraph examiner's report: _____

D) Opinion or conclusion of polygraph examiner:

() Truthful () Deceptive () Inconclusive

6. If Employee refused a polygraph test:

A) Date of refusal: _____

B) Name of individual to whom refusal was communicated:

7. Additional supporting evidence to support adverse action:

A) Facts indicating that the Employee had access to the missing or damaged property that is the subject of an ongoing investigation:

B) Facts leading to the Employer's reasonable suspicion that the Employee was involved in the incident or activity under investigation:

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C) Admissions or statements made by the Employee before, during or following the polygraph examination:

D) Other evidence supporting adverse action:

8. Adverse action taken by Employer:

() Discharge effective: _____
Date

() Suspension effective: _____
Date
for a period of _____ days.

() Denial of promotion.

() Other discipline: _____
(specify action taken)

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The undersigned, as an authorized representative of the Employer, hereby states as follows:

- A) The information contained herein is true to the best of my knowledge, information and belief.

- B) If the Employee took a polygraph test, a copy of the polygraph examiner's report was delivered to the Employee during the interview. The report contained the polygraph examiner's opinion or conclusion, and each of the relevant questions during the polygraph test with the corresponding charted responses. The Employee was also interviewed on the basis of the test results.

Date: _____

Signature

Name (please print)

Title or position

- NOTE:
- 1) This statement should be retained by the Employer for at least 3 years. A copy need not be delivered to the Employee / Examinee

 - 2) It is unlawful for adverse action to be taken solely on the basis of the polygraph examiner's opinion or conclusion or solely because the Employee / Examinee has refused to take a polygraph test.

 - 3) Adverse action may be taken if there is additional evidence supporting the Employee / Examinee's involvement in the incident or activity under investigation.