

Services Authorization Form

(Authorization must be presented to receive services)



GREENE CCC- CRIMINAL JUSTICE ACADEMY

532 Innovation Dr. Xenia, OH 45385

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Employee informatio	Employee must p	present p	onoto ID at	time	or service.	•			
Date & time:		Name:							
Date of Birth:			Phone:						
Services Requested (Internal use- numbers in brackets correspond to forms needed for service)									
SERVICES ALL SERVICE PAID AT TIME OF SERVICE							Check Item Needed	Initial Item Completed	
Post-Hire (Pre-Employment Exam) [Forms 1, 2, 3, 13]									
PLEASE COMPLETE GREENE CCC STUDENT HEALTH DATA FORM. (On File)									
Drug Screens	ALL SERVICE PAID AT TIME OF SERVICE				Test #		Check Item Needed	Initial Item Completed	
ECUP+5-Urine Drug Screen- 5 panel "RAPID" [Form 5] ECUP+5/ # 1200									
ESCREEN ACCOUNT #: 45335-2928									
ESCREEN ACCOUNT III. 4	<u> </u>								
REASON DRUG SCREEN TEST Pre-Employment Random Suspicion Post-Accident Return to							uty Follow-Up		
							Check	Initial Item	
Tech Services ALL SERVICE PAID AT TIME OF SERVICE Audiometric [WELLNOW UC use Form 24]						Item Needed	Completed		
Intake Instructions (Internal use) - Use Alere/eScreen for drug screens. This is a WellNow Clinic Account. ESCREEN ACCOUNT #: 45335-2928 DISCHARGE CHECKLIST- (Internal use) Must initial each item as completed									
DRUG TEST, EXAMS AND AUDIO COMPLETED AND REPORTED VIA ESCREEN.									
ALL SERVICES ARE SELF-PAY BY STUDENT									
Authorized by Name & Title:									
Phone Number: Date:									