

FORM 102

**EMPLOYER'S STATEMENT TO EMPLOYEE WITH RESPECT TO ONGOING INVESTIGATION
AND NOTICE OF REQUEST FOR POLYGRAPH TEST**

Employer's Name: _____

Business Street Address: _____

City _____ State _____ Zip _____

Employee's Name: _____

Address of where employee is employed:

Street Address: _____

City _____ State _____ Zip _____

Employer's Statement to Employee with Respect to Ongoing Investigation:

1. Incident or activity being investigated.

A. Description of incident or activity:

B. Date of time period in which incident or activity is believed to have occurred:

C. Location(s) where incident or activity is believed to have occurred:

D. Incident or activity involved: () Money () Merchandise

() Other: _____

E. Approximate dollar amount, if ascertained: \$_____

2. Type of economic loss under investigation:

- () Theft () Embezzlement () Misappropriation
() Unlawful industrial espionage or sabotage () Check Kiting () Money laundering
() Misappropriation of confidential or secret information

() Other: _____

3. If incident or activity involved money, merchandise or other property, area in which such money, merchandise or property is located and employee's access thereto:

4. Basis of Employer's reasonable suspicion that Employee was involved in the incident or activity under investigation.

A. Information from a co-worker or other individual:

B. Employee's behavior, demeanor or conduct:

C. Inconsistencies between facts, claims or statements that surfaced during the investigation:

D. Circumstances surrounding access or opportunity, such as its unauthorized or unusual nature:

E. Other basis for reasonable suspicion:
