



Occu-Med Medical Exam Requisition Form – San Joaquin County

Employer Information

Date of Request	
Referring Dept Name /Budget Unit (SST)	
Employer Representative	
Office Telephone	
Email Address	

Applicant / Employee Information

Name	
Job Class Title	
Date of CJO	
Date CJO Accepted	
Phone Number(s)	
Email Address	
Location (City/State/zip)	

Services Requested

- Arduous Physical
- Drug Screen (*New Hires only, as defined by County Drug Screen Policy*)

Additional Comments or known availability

Submit the completed form to:
scheduling@occu-med.com
 with cc to: hrpreemployment@sjgov.org

Any questions regarding an evaluation should be directed to team bailey at (559) 435-2800 x341 or teambailey@occu-med.com (email preferred)

All drug screen related questions and results should be directed to:
 Pauline Fass pfass@sjgov.org (209) 468-8480
 Karyn Watson kwatson@sjgov.org (209) 468-0266

All arduous physical related questions and results should be directed to:
 Pauline Fass pfass@sjgov.org (209) 468-8480
 Roman Plateau rplateau@sjgov.org (209) 468-3273