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## **Controlled Substance Authorized Agent Log**

Each registrant should keep an updated form on file. Only individuals on this list should be granted access to the controlled substances. The number of individuals who have access to controlled substances should be kept to the minimum number necessary. Individuals who no longer have access to controlled substances should be crossed off the list and the date their access was removed entered in. Each individual on the list must complete an Employee Questionnaire for Employees Who Will Have Access to Substances Regulated by the US Drug Enforcement Agency.

Registrant:

Registrant Address:					
DEA Registration #:			State of MI License #:		
Name	Z/A PID	Responsibilities delegate	ed to this employee:	Access Granted Date	Access Removed Date