

EMPLOYEE RANDOM DRUG TESTING CONSENT

I, _____, understand that the use of drugs, alcohol and other controlled substances in the workplace creates a safety concern for all employees. In the interest of creating a safe learning environment, I hereby give my consent for _____, hereinafter referred to as "the Company", to conduct random drug tests it considers as necessary in order to continue to keep a drug-free workplace.

I fully understand that as an employee that I will be subject to the random drug tests in accordance with the workplace policy.

My signature hereon serves as consent:

- a) For me to undergo random drug testing and to submit a urine sample, along with any other tests, for that purpose;
- b) For me to be randomly drug tested in accordance with the terms of the workplace drug-free policy; and
- c) For to submit my child's urine sample for testing for drugs/alcohol prohibited by its policy; and
- d) For the Company to obtain the results of my drug/alcohol test from a certified laboratory in accordance with standard drug testing policies.

I release the Company from any liabilities, claims and causes of action, known or unknown, contingent or fixed, that may result from these tests.

Employee (Minor) Name (Print)

Date

Employee (Minor) Signature

Parent / Guardian Name (Print)

Date

Parent / Guardian Signature

Non-Discrimination: The Company does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The following person has been designated to handle inquiries regarding the non-discrimination policies:

Name

Address

City

State

Phone