

CONSENT FOR NON DOT DRUG AND ALCOHOL TESTS, RELEASE AND POLICY REVIEW

I understand that the Agency "South Central Missouri Community Action Agency" Non DOT Drug and Alcohol Policy requires that a job applicant submit to and pass a pre-employment drug test. If I fail these tests, I understand that I will be unqualified for the position and will not be employed.

I certify that I do not presently use and will not use while an employee either on or off the job, the drugs or derivatives thereof: amphetamines, cocaine, marijuana, opiates, barbiturates, benzodiazepines, and phencyclidine, unless under a doctor's care. I understand that I must be available and cooperate with the MRO. I also verify that during the hours of prohibition, I will not use alcohol. I have provided the Agency with all information relating to my history of drug and alcohol test results.

I acknowledge that I received a copy of the Agency's Policy and have read it. I understand that any violation of this policy or my failure to cooperate fully of the policy will subject me to immediate discharge.

I release the Agency, the testing firm and all of their respective officers, directors and employees from any and all claims or liability based on or arising out of these tests, including but not limited to the testing procedures, the process of providing specimens for testing, the analysis, the disclosure of the test results and actions taken by the Agency or the testing firm in reliance on the test results.

This consent and release is given voluntarily in exchange for the Agency's continuation and/or consideration of my application for employment.

Print Full Name

Signature

Date