

**DRUG AND ALCOHOL POLICY ACKNOWLEDGEMENT AND RELEASE**

Printed Name: \_\_\_\_\_

I hereby acknowledge that I have been provided a copy of the Company Drug and Alcohol Policy (the "policy"). I acknowledge that I have read and understand the policy. I understand that a violation of this policy may result in the revocation of my employment offer from, or the immediate termination of my employment with the Company.

I understand that unannounced searches may be conducted of my person, and my personal effects, belongings, vehicles, quarters, rooms, lockers, baggage, office and desk for the limited purpose of determining whether drugs, paraphernalia or equipment related to illegal or unauthorized drug use, or alcohol, are in my possession while on the Company premises, while operating any the Company vehicle or equipment, or while conducting the Company business.

I am aware that the Company or authorized third parties will conduct urinalyses, blood tests, breathalyzer tests, or other tests for the purpose of determining if I am in violation of this policy. These tests may be used in the following situations: (a) pre-employment testing, (b) testing based on reasonable cause or suspicion, (c) random or periodic testing, (d) testing following an accident or incident involving injury or property damage, and (e) testing that is consistent with the enforcement of the policy.

I give my consent to the Company or its authorized representative or third party to search my person, vehicle, or personal effects, and to conduct a urinalysis, blood test, breathalyzer test, or other test for the purpose of determining my use of possession of these illegal controlled, or unauthorized items or substances.

I authorize the physician, nurse, or laboratory technician who conducts these tests to release the results of my tests to the Company for the purpose of determining if I am in violation of the Company's Drug and Alcohol Policy.

I RELEASE AND AGREE TO HOLD HARMLESS THE COMPANY, ITS OFFICERS, EMPLOYEES, AGENTS, AND INDEPENDENT CONTRACTORS, FROM ANY LIABILITY TO ME BASED ON ANY SEARCH OR DRUG OR ALCOHOL SCREENING PROCESS UNDERTAKEN PURSUANT BASED ON THOSE RESULTS. THIS RELEASE INCLUDES, BUT IS NOT LIMITED TO, LIABILITY BASED ON NEGLIGENCE.

**I understand that this Acknowledgement and Release becomes effective on the date it is signed and will continue to be effective unless revoked in writing and delivered to the Human Resources Department.**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE