## APPLICANT CONSENT FORM PRE-EMPLOYMENT DRUG SCREENING

I, the undersigned applicant for employment, understand that as part of its pre-employment process, the Lexington City School system requires that I submit to a urinalysis drug screening.

I do hereby voluntarily consent to the sampling and submission for testing of my urine for the sole purpose of screening the presence of controlled substances/illegal drugs. I understand that a negative result from this screening is a condition of employment. I further understand that if there is a positive result, I will be given the opportunity to provide an explanation of the presence of a drug in my urine and/or have my urine split sample retested. The re-test will be at my expense.

I also understand that refusal to supply the necessary urine sample in a reasonable and timely manner or a positive and unexplained test result for the presence of controlled substances/illegal drugs will result in my being denied employment by the school system for a period of at least six months.

I authorize disclosure of the test screening results by Nationwide Truckers Association, the school system's contract agency, to the Human Resources office of the Lexington City Schools and if necessary, to the school system's medical review officer.

If I wish to have a written copy of the results, I must make that application in writing to the Human Resources office.

I understand that employment is contingent upon the results of the drug screening.

Signature	
Date	