

**Acknowledgment, Authorization and Consent Form  
For Drug and Alcohol Testing**

**5232-E**

I, \_\_\_\_\_, acknowledge receiving this day, written notice regarding the existence of the Jefferson-Lewis BOCES Drug and Alcohol Testing Program, and a copy of the District policy and regulations by which it will be administered.

I further understand and agree to submit to urinalysis, (hereafter "drug testing") for the detection of prohibited drugs, and evidential breath testing as required under the policy (hereafter "alcohol testing"). I understand that I can be tested for both drug and/or alcohol pursuant to the District's policy including; prior to admittance, pre-duty, random, reasonable suspicion, and post-accident testing as the circumstances require.

I understand, further, that violation of the policy or refusal to submit to testing required by the District's policy, will result in removal from the CDL program, forfeiture of all monies spent for tuition and fees and ineligibility to re-enroll in the course or use commercial vehicles for one year.

By signing this document, I release to Jefferson-Lewis BOCES and the Jefferson-Lewis BOCES Drug and Alcohol Coordinator all results regarding drug and alcohol testing or any refusal to submit to drug and alcohol testing from both past and present employers' drug and alcohol testing programs or CDL training programs.

My signature below indicates my understanding of this Policy and what is expected of me, as well as, my consent to be tested. Furthermore I authorize release to collection site personnel, medical review officer, the designated employer representative all information necessary to comply with this Policy.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_

**Approved:**    March 18, 1998