

**MOSCOW SCHOOL DISTRICT 281
DOT (Department of Transportation)**

**DRUG TESTING PROGRAM
Controlled Substance Testing Consent Form
(Current Drivers)**

As a condition of my continued employment as a driver of a commercial motor vehicle for Moscow School District 281, I consent to take a drug and/or alcohol test as required by the terms of the District's Substance Abuse Policy 8030.000 - 8050.00.

I understand that if I test positive for illegal drugs or alcohol, I will be terminated from employment with the District.

I further agree that in the event that I am involved in an on-the-job accident (as defined by the terms of the District's Substance Abuse Policy 8022.00, 8030.00 – 8050.00), I authorize the release of relevant hospital reports, or other documentation, that would indicate whether there were any illegal drugs or alcohol in my system at the time of the accident.

I consent to the release of my drug and alcohol test results received by Minert & Associates, Inc., as the representative of the Medical Review Officer, to management officials at Moscow School District 281 and understand that those results will be held in confidence by them.

I have received, read, and understand the terms of the District's Drug Free Workplace (**Policy 4937.00**) testing program, and agree to abide by those terms.

Date

Driver's Printed Name

Driver's Signature