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## SUBSTANCE ABUSE TESTING CONSENT AND AGREEMENT

### ACKNOWLEDGEMENT

I, \_\_\_\_\_, acknowledge that I have read and understand the Substance Abuse Policy of THE COMPANY and will ensure that I review all future updates of these policies. Further, I agree to adhere to these Policies and Practices and will ensure that employees working under my direction adhere to same. I understand that if I violate the rules and procedures outlined in the Policy. I may face disciplinary action, up to and including dismissal with cause.

Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Applicant's Signature: \_\_\_\_\_

Witness's Signature: \_\_\_\_\_