

**Northern NY NECA
&
Local Union #910, IBEW**

Consent Form

I have been given a copy of the Northern NY NECA and Local Union #910 IBEW Drug and Alcohol Policy.

As a condition of: 1) being considered for employment from the “drug free applicant pool”; 2) continuing employment with a “drug free” employer; or 3) being eligible for employment on a “drug free” jobsite, I hereby consent to submit to such urinalysis, breath alcohol test and/or other tests as shall be determined by the policy for the purpose of determining the presence of alcohol or the following drugs: marijuana metabolites, cocaine metabolites, opiate metabolites, phencyclidine and amphetamines. I agree that any specimens collected for these may be forwarded to a certified testing laboratory for analysis. I further agree to and hereby authorize the release of any and all results of said tests to the parties designated in the policy.

I acknowledge all conditions, requirements and consequences under the policy. I understand that my refusal to submit to testing as required and/or permitted under the Policy, or falsification of a test will be regarded as a positive test result rendering me subject to the attendant consequences set forth in the policy.

I further understand that 1) the policy is meant to be a minimum standard to assist employers in maintaining a drug and alcohol-free workplace; and 2) individual employers, customers of employers and/or specific jobsites may require additional testing of employees. Employees and/or applicants for employment in such cases shall be required to meet the standards established for said employers, customers and/or jobsites.

I have carefully read the forgoing Consent Form and fully understand its contents. I acknowledge that signing this form is a voluntary act on my part.

Print Name

Social Security Number

Signature

Date