## CONSENT FOR DRUG/ALCOHOL TESTING

	ment withall concerned, you will be required to take a
urine test for drug and/or alcohol (I unders procedure involved, and do hereby freely	, have been fully informed of the reason for this stand what I am being tested for), the give my consent. In addition, I understand that my potential employer and become part of my
If this test is positive, and for this reas	son I am not hired, I understand that I e results of this test.
I hereby authorize these test results to(Company name).	
Signature	Date
Witness	Date