



Pre-employment Notification and Urinalysis Consent Form

****** Applicant: Please fill in only the items highlighted. ******

PRE-EMPLOYMENT NOTIFICATION AND URINALYSIS CONSENT FORM

I understand that as required by the Federal Motor Carrier Safety Regulations, Section 382.301 and Section 382.113 that all driver applicants of this company must be tested for controlled substances as a pre-condition for employment.

I consent to the urine sample collection and testing for controlled substances.

I understand that a positive test result for controlled substances will render me unqualified to operate a commercial motor vehicle.

The medical review officer will maintain the results of my test. Negative and Positive results will be reported to the company. If the results are positive, the controlled substance will be identified. The results will not be released to any other parties without my written authorization.

I understand the above conditions and hereby agree to comply with them

(Applicant s' signature)

(Date)

(Applicants Name-print)