

East Texas Council on Alcoholism and Drug Abuse

Employee Consent for Pre-Employment Drug-Screen Consent

Applicant's Name: _____

Date of Application: _____

According to our state funder (Health and Human Services Commission) *East Texas Council on Alcoholism and Drug Abuse* is required to submit all employees to a *Pre-employment* drug test. The method of testing used shall preserve the privacy of the individual tested and ensure the integrity and identity of the specimen collected. In addition, "chain of custody" procedures are in place and documentation on the handling and storage of a specimen is maintained.

I, _____ do hereby give my
Staff Name
consent to allow *ETCADA* to conduct a pre-employment drug test. I understand that documentation of this test will be used to evaluate my future employment with *ETCADA*. If hired, I understand that this information will be placed in my personnel record, accessible only by management of *ETCADA*.

Applicant Signature

Date

THIS FORM IS TO BE FILED IN SECTION II OF THE EMPLOYEE'S PERSONNEL FILE