



PRE-EMPLOYMENT ALCOHOL & CONTROLLED SUBSTANCES TESTING CONSENT FORM

TO BE SIGNED BY ALL PROSPECTIVE COMMERCIAL DRIVERS' LICENSED EMPLOYEES COVERED BY THE FEDERAL CDL DRUG AND ALCOHOL TESTING REGULATIONS.

As a condition of employment with the Idaho Department of Parks & Recreation (IDPR), I hereby consent to and acknowledge that I am scheduled to undergo a controlled substances test. The Department's offer of employment is conditional upon the negative result of a drug test prior to the first time I perform a safety-sensitive function for the agency.

The controlled substances test will involve an analysis of a urine sample which I will provide at a designated Collection Site. The purpose of this controlled substances screening is to test for the presence of the following substances:

1. Marijuana
2. Cocaine
3. Opiates
4. Phencyclidine (PCP)
5. Amphetamines

I acknowledge that the test results will be made available to IDPR Human Resources Officer and to specific agency management.

As a probationary employee for whom pre-employment controlled substances' testing is required, I am aware that my employment will be terminated if I receive a confirmed positive test result. Additionally, if I fail to report for testing within 48 hours of being directed to do so by the agency, IDPR will terminate my employment.

If I refuse to undergo treatment or if I have a previous positive test result, I am aware that my employment with IDPR will be terminated. I am aware that if I tamper with or attempt to alter the testing process or if I refuse to submit to the testing process, my employment with IDPR may be terminated.

My signature indicates my consent to test a urine specimen provided by me to determine the presence of controlled substance(s).

Employee Name (Print Name)

Date

Employee Signature

Division

RETURN FORM TO THE HR OFFICE