**DRUG TESTING CONSENT AGREEMENT**

The effective date of this Drug Testing Consent Agreement ("Agreement") is his [DATE], made

**BETWEEN: [EMPLOYEE NAME]** (the "Employee"), an individual with his main address at:

 [COMPLETE ADDRESS]

**AND: [YOUR COMPANY NAME]** (the "Company"), a company organised and existing under the laws of the [State/Province] of [STATE/PROVINCE], with its head office located at:

 [YOUR COMPLETE ADDRESS]

In connection with my application for employment with the Company, I hereby agree as follows:

1. **TERMS**

I have applied for employment with [YOUR COMPANY NAME] in a position that requires me to operate an automobile or truck. As a condition for my application being considered, I understand and agree to undergo substance screening. I understand that if my test results are positive, I shall not be considered further by [COMPANY] for a car or truck driver position.

I hereby authorise any physician, laboratory, hospital or medical professional retained by the Company for screening purposes to conduct such screening and to provide the results to the Company and I release the Company and any person affiliated with [YOUR COMPANY NAME] and any such institution or person conducting the screening, from liability therefore.

This Agreement represents the entire understanding and agreement relating to its subject matter. Company shall be entitled fully to rely on this Agreement. I understand that I have no guarantee of employment and that the Company may determine not to hire me for any lawful reason.

EMPLOYEE COMPANY

Authorised Signature Authorised Signature

Print Name and Title Print Name and Title