

MOUNTAIN / SERVICE DISTRIBUTORS

PRE-EMPLOYMENT DRUG TESTING CONSENT & RELEASE FORM

I hereby consent to submit to a drug and/or alcohol test as required by Mountain / Service Distributors in the selection process of applicants for employment, for the purpose of screening for illegal drugs. I agree that Community General Hospital may collect a specimen for this test and forward it to Laboratory Corporation of America (Lab Corp) for analysis. I further agree to and hereby authorize the release of the results to the designated Medical Review Officer (MRO) for interpretation, prior to the results being released to my prospective employer. I agree to hold harmless my prospective employer and its agents, including the collection site and MRO, from any liability arising, in whole or in part, out of the collection, laboratory analysis or medical review of my specimen, and use of the information in connection with the company's consideration of my application for employment. I further agree that a reproduced copy of this pre-employment consent and release form shall have the same effect as the original.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

Applicant:

Print

Name _____ SS# _____

Applicant:

Signature _____ Date: _____

Witness Printed

Name _____

Witness Signature _____