POARCH BAND OF CREEK INDIANS CONSENT TO ON-SITE DRUG SCREEN

| Name: | |
|---|------|
| For participation in Tribally Sponsored Program(s): | |
| I, the undersigned, consent to initial, random, and reasonable suspicion on-site drug screens between January 1, 2019 and December 31, 2019. I understand that refusal to submit to testing will be deemed a violation of The Poarch Band of Creek Indians Tribally Sponsored Program's Drug Testing Policy. I also understand the results of this drug screen will be shared with all tribally sponsored programs and may affect my eligibility to participate is said programs. | |
| If Participant is a minor under the age of 19, Participant consents to the results of any drug testing being disclosed to the Guardian listed below. | |
| Accepted and Agreed: | |
| Name | Date |
| (Print) Signature | Date |
| If minor child: Name of Guardian: | Date |
| Signature of Guardian: | Date |
| (Signature of Guardian if under 19 years of age) | |
| Collector Signature | Date |
| Collection Date: Collection Time: | |
| Test Results: Negative Positi | ve |