

**CONSENT TO DRUG AND ALCOHOL TESTING**

I, \_\_\_\_\_, acknowledge receipt of Ozark Action, Inc.'s Drug and Alcohol Testing Policy. I understand that I am subject to drug and alcohol testing under this policy as an applicant for employment; when Ozark Action has reasonable suspicion to believe that I am in violation of the Policy; following certain accidents; on a random basis; on a follow up/return to duty basis and when I transfer to a position requiring a commercial driver's license (CDL). The circumstances when testing will be performed are described in the Policy.

I hereby consent to the drug and alcohol testing as described in the Policy. I release and discharge Ozark Action, and its officers and employees, from any claims or liabilities in connection with the collection of samples, testing and disciplinary action based on the test results, and from any search or investigation arising from a suspected violation of this Policy.

I understand that if I test positive for drugs or alcohol in violation of the Policy, I will be subject to disciplinary action, and if I am an applicant that I will be disqualified from employment with Ozark Action.

I understand that I am employed at will. I have the right to leave employment with Ozark Action at any time and for any reason, and Ozark Action has the right to terminate my employment at any time and for any reason. Neither this Consent, nor the Policy, alters my status as an at will employee.

\_\_\_\_\_  
Employee/Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
HR/CSD Administrator

\_\_\_\_\_  
Date