

Drug Testing Consent Form

I have applied for employment with [Your Business] [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 [Your Business] [for a car or truck driver position].

I hereby authorize any physician, laboratory, hospital or medical professional retained by [Your Business] for screening purposes to conduct such screening and to provide the results to [Your Business], and I release [Your Business] and any person affiliated with [Your Business] and any such institution or person conducting the screening, from liability therefor.

Applicant's signature: _____

Applicant's name: _____

Date: _____