



## **Applicant Acknowledgement of Company Drug/ Alcohol Testing**

As a condition of employment with this company, I understand that, in accordance with the FAA Anti-Drug Testing Program, I will be required to take a pre-employment drug test.

The anti-drug program requires urine testing for the following five specific drugs – marijuana, cocaine, opiates, amphetamines, and PCP.

If hired, I further understand that I will be part of the company's ongoing drug / alcohol misuse testing program which includes random, reasonable suspicion, post accident and return to duty testing.

The Alcohol Misuse Prevention Program requires evidential breath testing (EBT) conducted by qualified technicians on approved testing equipment.

If I either refuse to cooperate with the mandatory FAA Anti-Drug/ Alcohol Misuse testing program as implemented by this company, or if I have a verified positive drug test reported to the company after the careful review of the Medical Review Officer, I understand that I will not be considered for employment.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_