

**DRUG TEST CONSENT FORM**  
**N.C. CONTROLLED SUBSTANCE EXAMINATION REGULATION ACT**

In accordance with our County policy, you have been selected for a controlled substance \_\_\_\_\_ testing (*insert here: pre-employment, post-accident, reasonable suspicion, random, return to duty, follow-up test.*) In accordance with 13 NCAC 20.0401, this Notice explains your rights and responsibilities under the N.C. Controlled Substance Examination Regulation Act ("CSERA") (Chapter 95, Article 20 of the N.C. General Statutes) and the corresponding administrative rules (Title 13, Chapter 20 of the N.C. Administrative Code).

- You may refuse this test; however, your job or employment opportunity will be in jeopardy.
- Although applicants may be screened by means of a "Quick Test," any positive results must be confirmed by an approved lab using gas chromatography with mass spectrometry (GS/MS) or equivalent scientifically accepted method before hiring decisions are made.
- Current employees cannot be screened by means of a "Quick Test."
- An approved laboratory must perform testing of samples.
- You can request a "re-test" of any positive sample. Retests must be on the same sample and any expense must be paid for by you, the employee or applicant.
- You can file a complaint with the N.C. Department of Labor - Wage and Hour Bureau at (919) 807-2796 or 1-800-NC-LABOR if you believe procedural requirements of the CSERA were violated. The Department has no jurisdiction regarding an employer's requirement for controlled substance testing or its decisions regarding results of controlled substance testing.
- Current employees being tested for post-accident, reasonable suspicion, return to duty, or follow-up test must have testing completed within eight (8) hours for substance abuse and 32 hours for alcohol. This form must be signed by management and presented to the testing facility at the time of test.
- **Applicants:** Drug/alcohol test must be completed within eight (8) hours of when the representative signs below. Applicants must present this form to the testing facility. Any applicants requesting testing after the eight (8) hour restriction must receive prior approval by the H.R. Director or the hiring authority for those being employed with DSS, Health, Sheriff and Register of Deeds Offices. Failure to follow the criteria may result in Alexander County withdrawing the Conditional Offer of Employment.

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

\_\_\_\_\_  
Date & Time

\_\_\_\_\_  
Authorized Representative                      Title

\_\_\_\_\_  
Date & Time

\_\_\_\_\_  
Substance Abuse Testing Authority

\_\_\_\_\_  
Date & Time

Send Confidential Results to:

Human Resources  
621 Liledoun Road  
Taylorsville, NC 28681