



### **SUBSTANCE USE TESTING FORM**

I hereby certify that I have reviewed a written copy of MidStar Timber Harvesting, Inc.'s Drug-Free Workplace Policy which is effective February 21, 2005. I have been given the opportunity to ask questions regarding this policy. I understand that violation of this policy is cause for disciplinary action, up to and including termination, or disqualification of employment.

I hereby give my voluntary consent for specimen(s) to be collected from me and submitted for drug and/or alcohol testing as a condition of my initial or continued employment. I understand that I will not be forced to submit to any alcohol or drug test, but my refusal to do so shall result in termination of employment or consideration for employment. I further consent to the release of said test results to MidStar Timber Harvesting, Inc. and the said employer's Medical Review Officer. I understand that these results will be held in strict confidence.

I understand that MidStar Timber Harvesting, Inc. has the right to conduct searches and inspections of any employee's personal effects, clothing, work area, and vehicle for the purpose of determining if such employee or other person is in possession, uses, transports, or conceals any prohibited items and/or substances.

Searches, inspections, and substance use testing as may be required from time to time without prior announcement shall be conducted with concern for the personal privacy of each employee. I understand that consent and cooperation in these procedures is a condition of employment, and that refusal to consent may result in termination or disqualification from employment.

I understand that copies of this original shall have the same force and effect as the original.

I understand that this agreement in no way limits my rights or MidStar Timber Harvesting, Inc.'s right to terminate employment at any time for any reason.

\_\_\_\_\_  
**PRINT NAME**

\_\_\_\_\_  
**SOCIAL SECURITY NUMBER**

\_\_\_\_\_  
**EMPLOYEE'S (APPLICANT) SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**WITNESS' PRINTED NAME**

\_\_\_\_\_  
**TITLE**

\_\_\_\_\_  
**WITNESS' SIGNATURE**

\_\_\_\_\_  
**DATE**