



## Applicant / Employee Drug Test Consent Form and Release

I hereby give consent for **NEESE PERSONNEL** to have a certified laboratory collect a urine specimen as a condition of employment or continued employment. I give any certified testing laboratory my permission to release all results of such tests to **NEESE PERSONNEL**.

I understand that I may be denied employment, or if hired, may be terminated for testing positive, or for any other violation. I understand that this consent and release form does not create an employment contract for a specific term or in any way limit my rights or **NEESE PERSONNELS'** right to terminate employment at time for any reason.

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Signature

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Date

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Print Name