

Yukon Public School District
Student Drug Testing Consent Form

Statement of Purpose and Intent

Participation in school sponsored extra-curricular activities at the Yukon School District is a privilege. Activity Students carry a responsibility to themselves, their fellow students, their parents, and their school to set the highest possible examples of conduct, which includes avoiding the use or possession of illegal drugs.

Drug use of any kind is incompatible with participation in extra-curricular activities on behalf of the Yukon Public School District. For the safety, health, and well being of the student of the Yukon Public School District, the Yukon Public School District has adopted the attached Activity Student Drug Testing Policy and the Student Drug Testing Consent for use by all participating students at the middle school and high school levels.

Participation in Extra-Curricular Activities

Each Activity Student shall be provided with a copy of the Activity Student Drug Testing Policy and Student Drug Testing Consent which shall be read, signed and dated by the student, parent or custodial guardian, and coach/sponsor before such student shall be eligible to practice or participate in any interscholastic activities. The consent shall be to provide a urine sample when chosen by the random selection basis and at any time requested based on reasonable suspicion to be tested for illegal drugs. No student shall be allowed to practice or participate in any activity governed by the policy unless the student has returned the properly signed Student Drug Testing Consent.

Student's Last Name	First Name	MI	Student ID#
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I understand after having read the "Student Activity Drug Testing Policy" and "Student Drug Testing Consent," that, out of care for my safety and health, the Yukon Public School District enforces the rules applying to the consumption or possession of illegal drugs. As a member of a Yukon extra-curricular interscholastic activity, I realize that the personal decision that I make daily in regard to the consumption or possession of drugs may affect my health and well-being as well as the possible endangerment of those around me and reflect upon any organization with which I am associated. If I choose to violate school policy regarding the use or possession of illegal drugs any time while I am involved in in-season or off-season activities, I understand upon determination of that violation I will be subject to the restrictions on my participation as outlined in the Policy.

Signature of Student	Date
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We have read and understood the Yukon Public School District "Activity Student Drug Testing Policy" and "Student Drug Testing Consent." We desire that the student named above participates in the extra-curricular interscholastic programs of the Yukon Public School District and we hereby voluntarily agree to be subject to its terms. We accept the method of obtaining urine samples, testing and analysis of such specimens, and all other aspects of the program. We further agree and consent to the disclosure of the sampling, testing and results as provided in this program.

Signature of Parent or Custodial Guardian	Date
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Signature of Coach/Sponsor/Designee	Team
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***Yukon Public School District
Voluntary Participation Consent Form***

The Yukon Board of Education believes that illegal drug use of any kind is incompatible with the physical, mental, and emotional demands placed upon participants in extra-curricular activities which involve competition and upon the positive image that these students project to their students and to the community on behalf of the Yukon Public School District. The Board also believes that illegal drug use affects all students, their families, the school, and the community as well. Therefore, the Yukon Board of Education encourages parents to voluntarily submit their children to random drug testing.

The voluntary participants will be included on the grade level list for activity students and will be selected in the same random process. The laboratory will notify the building principal or designee of any positive test or adulterated/tampered specimen. The principal or designee will notify the student and the parent or custodial guardian of the results. The principal and director of student assistance will schedule a conference with the student and parent or guardian to present alternatives available for substance abuse programs and counseling. Parents will be responsible for the cost of these programs. The student will be tested for the remainder of the year.

Student's Last Name	First Name	Middle Initial	Student ID#
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We have read and understand the Yukon Public Schools Voluntary Participation Consent Form and agree to voluntarily participate in the drug testing program. We desire that the student named above be included in the random testing program and accept the method of obtaining urine samples, testing and analysis of such specimens, and all other aspects of the program. We further agree and consent to the disclosure of the sampling, testing and results as described in this consent form.

Signature of Parent or Custodial Guardian

Date

Signature of Student

Date

Signature of Building Principal

Date