

DELANCO TOWNSHIP BOARD OF EDUCATION

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Commercial Driver Controlled Substances and Alcohol Testing

COMMERCIAL DRIVER CONTROLLED SUBSTANCE AND ALCOHOL TESTING

The Board of Education is committed to a safe, efficient and alcohol and drug-free workplace, that protects the district's pupils as well as the health and safety of its employees and the general public. The Board requires that all drivers performing any safety-sensitive function are free of drugs and alcohol and will test those employees who operate a commercial motor vehicle in accordance with 49 C.F.R. 382 et seg. and 49 C.F.R. 40 et seg. Safety-sensitive function as defined by 49 C.F.R. 382.107 means all time from the time a driver begins work or is required to be in readiness to work until the time the driver is relieved from work and all responsibility for performing work.

Safety-sensitive function shall include:

- A. All time at the terminal facility or any public property waiting to be dispatched unless relieved from duty;
- B. All time inspecting equipment;
- C. All time spent at the driving controls of a commercial motor vehicle in operation;
- D. All time other than driving time in or upon the commercial vehicle except in an area defined as a sleeping berth;
- E. All time loading and unloading a vehicle, supervising, or assisting in the loading or unloading, attending a vehicle being loaded or unloaded, remaining in readiness to operate the vehicle or in giving or receiving receipts for shipments loaded and unloaded;
- F. All time spent performing driver requirements related to accidents; and
- G. All time repairing, obtaining assistance, or remaining in attendance with the vehicle.

The Omnibus Transportation Employee Testing Act requires all operators of commercial motor vehicles subject to the Commercial Drivers License requirements to be tested for controlled substances and alcohol. Federal regulations of the U.S. Department of Transportation require that school bus drivers as well as drivers of private carriers of passengers contracted by the Board be required to submit to alcohol and controlled substance testing in accordance with 49 C.F.R. Part 40. The Board designates the Superintendent as the Designated Employer Representative (DER). officer of the Board of Education. The Board may contract with a service agent to provide the testing services as required by Federal Regulations.

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No driver at any work site will possess, manufacture, use, sell, or distribute any quantity of any controlled substance, lawful or unlawful, which in sufficient quantity could result in impaired performance, with the exception of substances administered by or under the instructions of a physician. No driver shall perform safety-sensitive functions within four hours after using alcohol and the district will not permit a driver that used alcohol within four hours of performing safety-sensitive functions to perform such functions if the district has actual knowledge of the use.

Violations

Any violation of this policy may result in discipline, up to and including termination. Prohibited Substances The presence of any of the following controlled substances in the body, as evidenced by the results of the initial screening and subsequent confirmatory analysis provided in the policy, is prohibited for any employee assigned to a classification covered by this policy. All cutoff concentrations are as per 49 C.F.R. 40.87 and are expressed in nanograms per milliliter (ng/mL).

Type of Drug or Metabolite Initial Test Confirmation Test

Marijuana metabolites 50

Delta-9-tetrahydrocanna-

Binol-9-carboxylic acid (THC) 15

Cocaine metabolites 300 150

(Benzoylecgonine)

Phencyclidine (PCP) 25 25

Amphetamines 1000

Amphetamine 500

Methamphetamine 500* (*Specimen must also contain amphetamine at a concentration greater than or equal to 200 ng/mL.)

Opiate metabolites 2000

Codeine 2000

Morphine 2000

6-acetylmorphine (6-AM) 10**

(**Test for 6-AM in the specimen. Conduct this test only when specimen contains morphine at a concentration greater than or equal to 2000 ng/mL.)

Alcohol .02 or higher .02 or higher

Testing Procedures

All testing for controlled dangerous substances will be conducted in accordance with 49 C.F.R. Part 40, Subparts A, B, C, D, E, F, G, H and I. The district will only test for the above stated five drugs or classes of drugs in accordance with 49 C.F.R. 40.85. Testing for alcohol will be conducted in accordance with as 49 C.F.R. Part 40, Subparts J, K, L, M and N.

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Definitions

"Alcohol" means the drinking or swallowing of any beverage, liquid mixture or preparation (including medication) containing alcohol.

"Confirmatory Drug Test" means a second analytical procedure performed on a urine specimen to identify and quantify the presence of a specific drug or drug metabolite.

"Confirmed Drug Test" means a confirmation drug test received by a Medical Review Officer (MRO) from a certified laboratory.

"Controlled substances" means those substances identified in 49 C.F.R. 40.85.

"CCF" means the Federal Drug Testing custody and Control Form.

"Designated Employer Representative" is an employee of the district authorized to take immediate action(s) to remove employees from safety-sensitive duties, or cause employees to be removed from these covered duties, and to make required decisions in the testing and evaluation processes. The Designated Employer Representative (DER) shall receive test results and other communications for the employer, consistent with the requirements of this policy and 49 C.F.R. 40. Service agents cannot act as a DER.

"FMCSA" means Federal Motor Carrier Safety Administration.

"Initial Drug Test" means the test used to differentiate a negative specimen from one that requires further testing for drugs or drug metabolites.

"Initial Validity Screening" means the first test used to determine if a specimen is adulterated, diluted or substituted.

"Medical Review Officer" is a licensed physician responsible for receiving and reviewing laboratory results generated by the district's drug testing program and evaluating medical explanations for certain drug test results.

"Possess" means either in or on the driver's person, personal effects, motor vehicle or areas substantially entrusted to the control of the driver.

"Service agent" is any person or entity, other than an employee of the Board, who provides services specified under 49 C.F.R. 40 to the Board.

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"Substance Abuse Professional" is a person who evaluates employees who have violated a drug and alcohol regulation and makes recommendations concerning education, treatment, follow-up testing and aftercare. Individuals permitted to act as Substance Abuse Professionals must possess the credentials as outlined in Commercial Driver Controlled Substances and

"Work Site" means any motor vehicle, office, building, yard or other location at which the driver is to perform work.

Categories of Testing

For the purpose of this policy, the occurrence of the following circumstances/instances shall require an employee to submit to a controlled substance and alcohol screening:

A. Pre-Employment Testing - An individual who has applied for and has been selected to operate a Board vehicle shall, before beginning employment with the Board, submit to a controlled substance screening in conjunction with any required physical examination as per Policy No. 4160. Such screening shall be conducted in accordance with the procedures set forth in this policy and 49 C.F.R. 40. No individual receiving a positive confirmed test result, from such screening will be employed by the Board.

An exception to the pre-employment screening may be made if the prospective employee:

1. Has participated in a controlled substance testing program that met the requirements of 49 C.F.R. 382 et seg. within the previous thirty days and while participating in that program either:
 - a. Was tested for controlled substances within the past six months (from the date of application to the district), or
 - b. Participated in the random controlled substances testing program for the previous twelve months (from the date of application to the district); and
 - c. The DER must ensure that no prior employer, to the DER's knowledge, has records of a violation of a controlled substance testing program within the previous six months. If an individual is so exempted, the Designated Employer Representative (DER) shall contact the alcohol and/or controlled substances testing program in which the driver participated and obtain the following information in accordance with 49 C.F.R.382.301(c):
 1. Name and address of the program;
 2. Verification of the driver's participation;

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3. Verification that the program conforms to federal guidelines
4. Verification the driver qualified and did not refuse to be tested for controlled substances;
5. The date the driver was last tested for controlled substances; and
6. The results of any tests taken within the last six months and any other violations.

PART TWO OF THREE .

B. Random Testing - A Covered employee shall be subject to submit to alcohol and controlled substance testing on an unannounced and random basis resulting from the selection by a random generation methodology in accordance with 49 C.F.R. 383.305(i). Random testing will be spread reasonably throughout any given calendar year. The minimum annual percentage rate for random alcohol testing shall be 10% of the average number of drivers. The minimum rate of random controlled substances testing shall be 50% of the average number of drivers. These rates may be adjusted as determined by the FHWA (Federal Highway Administration) Administrator in accordance with 49 C.F.R. 382.305. Drivers shall only be random tested when performing safety-sensitive functions or immediately prior to or immediately following the performance of safety-sensitive functions.

C. Post-Accident Testing - The involvement by an employee in a motor vehicle collision while operating a Board vehicle when such accident results in property damage or personal injury, may trigger a post-accident drug and alcohol test. As soon as practical following an occurrence, the DER will require post-accident drug/alcohol screening for each of the surviving drivers:

1. Who was performing safety-sensitive functions with respect to a vehicle, if the accident involves the loss of human life; or
2. Who receives a citation within eight hours of the occurrence under State or local law for a moving traffic violation arising from the accident, if the accident involved:
 - a. Bodily injury to any person, who, as a result of the injury immediately receives medical treatment away from the scene of the accident; or

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b. One or more motor vehicles incurring disabling damage as a result of the accident, requiring the motor vehicle to be transported away from the scene by a tow truck or other motor vehicle.

3. If the alcohol test is not administered within two hours following the accident, the DER will prepare and maintain on file a record stating the reasons the test was not promptly administered. If the alcohol test is not administered within eight hours following the accident, the DER shall cease attempts to administer the alcohol test and shall prepare and maintain the same record. Records shall be submitted to the FMCSA upon request. As soon as possible following an occurrence, the district will require post-accident controlled substance screening for each of the surviving drivers:

1. Who was performing safety-sensitive functions with respect to a vehicle, if the accident involves the loss of human life; or

2. Who receives a citation within thirty-two hours of the occurrence under State or local law for a moving traffic violation arising from the accident, if the accident involved:

a. Bodily injury to any person, who, as a result of the injury immediately receives medical treatment away from the scene of the accident; or

b. One or more motor vehicles incurring disabling damage as a result of the accident, requiring the motor vehicle to be transported away from the scene by a tow truck or other motor vehicle.

3. If the controlled substance test is not administered within thirty-two hours following the accident, the DER shall cease attempts to administer the controlled substance test and shall prepare and maintain the same record. Records shall be submitted to the FMCSA upon request. A driver who is subject to post-accident testing shall remain readily available for such testing or be deemed to have refused to submit for testing. A driver who is injured in an accident

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and requires medical care, shall submit to post-accident drug and controlled substance testing by the medical care

facility providing the treatment or a designee of the Board if the facility is unable to provide the testing. Nothing herein shall be construed to prevent the driver from leaving the scene of the accident for the period required to obtain necessary assistance or to obtain emergency medical care.

D. Reasonable Suspicion Testing - The DER may require a driver to submit to an alcohol and/or controlled substance test when the driver is observed by a supervisor or school official who is trained in accordance with 49 C.F.R. 382.603 and causes the observer to have reasonable suspicion to believe the driver has violated 49 C.F.R. 382 et seq. Reasonable suspicion must exist to require the driver to undergo a test and must be based on specific, contemporaneous, articulable observations concerning the appearance, behavior, speech or body odors of the driver. The observations may include indications of the chronic and withdrawal effects of controlled substances. Reasonable suspicion alcohol testing is authorized only if the required observations are made during, just preceding, or just after the period of the work day the driver is required to be in compliance with the testing requirements of 49 C.F.R. 382 et seq. Reasonable suspicion testing may be required of a driver while the driver is performing, just before the driver will perform or just after the driver has ceased performing safety-sensitive functions. If the alcohol test is not administered within two hours following the determination a reasonable suspicion test is required, the DER will prepare and maintain on file a record stating the reasons the test was not promptly administered. If the alcohol test is not administered within eight hours following the determination, the DER shall cease attempts to administer the alcohol test and shall state in the record the reasons for not administering the test. No driver shall report for duty or remain on duty requiring the performance of safety-sensitive functions while the driver is under the influence of or impaired by alcohol, as shown by the behavioral, speech and performance indicators of alcohol misuse. The driver will also not be able to perform or continue to perform safety-sensitive functions until an alcohol test is administered and the driver's concentration measures less than 0.02 or twenty-four hours have elapsed following the determination that reasonable suspicion existed to require an alcohol test. A written record of the observations leading to a reasonable suspicion test shall be made and signed by the supervisor and/or school official that made the observations. This record shall be made within twenty-four hours of the observed behavior or before the results of the test are released, whichever is earlier.

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E. Return to Duty Testing - The district is not required to return an employee to a safety-sensitive position upon receipt of a confirmed drug and/or alcohol test. The Designated Employer Representative (DER) may recommend to the

Superintendent of Schools the individual's employment be terminated depending on the circumstances. In the event the DER does not recommend termination, the DER shall ensure that before a driver returns to duty requiring the performance of a safety-sensitive function, the driver shall undergo a return to duty alcohol test indicating a breath alcohol concentration of less than 0.02 and a controlled-substances test with a result indicating a verified negative result for controlled-substances use as required in 49 C.F.R. 40.305. Drivers permitted to return to duty are required to take return-to-duty tests and shall be evaluated by a Substance Abuse Professional (SAP). These individuals must participate in an assistance program prescribed by the SAP and as required in 49. C.F.R. 40 Subpart O. The SAP will determine a written follow-up testing plan for any individual who has been permitted to return to work and has successfully complied with the SAP's recommendations for education and/or treatment. Such employees are subject to a minimum of six unannounced, follow-up drug screenings and alcohol tests over the following twelve months. The testing shall not exceed sixty months. Alcohol follow-up testing shall be performed only when the driver is performing safety-sensitive functions or immediately prior to performing or immediately after performing safety-sensitive functions. All follow-up testing will be completed in accordance with 49 C.F.R. 40.307. The SAP will comply with all reporting requirements of 49 C.F.R. 40.311. Medical Review Officer (MRO) Notifications The Board shall employ or contract with a medical review officer who is a licensed physician (M.D. or D.O.) and shall designate the Medical Review Officer as the individual responsible for receiving laboratory results generated by the testing program. The individual designated as the medical review official shall have knowledge of substance abuse disorders and have appropriate medical training to interpret and evaluate the individuals confirmed positive test together with his/her medical history and other biomedical data. The Medical Review Officer will perform all functions and responsibilities as required in 49 C.F.R. 49 Subpart G.

A. Employer Notification - The Medical Review officer may report controlled substances test results to the DER by any means of communication; however, a signed, written notification must be forwarded within three business days of the completion of the Medical Review Officer's evaluation. The Medical Review Officer must report all drug test results to the employer. The MRO may use a signed or stamped and dated legible photocopy of Copy 2 of the CCF to report test results or a written report that must include, at a minimum, the information required in 49 C.F.R. 40.163.

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Split Specimen Tests

Split specimen testing will be conducted in accordance with 49 C.F.R. 40 Subpart H. Under split-sample collection procedures, the driver has seventy-two hours from the time

of notification of a positive result to request the MRO to order a test of the split specimen. If the driver does not request a split specimen test within seventy-two hours, the driver may present to the MRO information documenting that serious injury, illness, lack of actual notice of the verified test result, inability to contact the MRO, or other circumstances unavoidably prevented the individual from making a timely request. If the split specimen is unavailable or appears insufficient, the laboratory will continue the testing process of the primary O specimen as the laboratory would normally. The laboratory will report the results for the primary specimen without providing the MRO information regarding the unavailable split specimen. In the event the MRO requests the split specimen be forwarded to another laboratory, the laboratory will report to the MRO the split specimen is unavailable for testing and the laboratory will provide the MRO with as much information as possible about the cause of the unavailability.

Designated Collection Facility

The Board shall designate the facility to be used for the collection of the specimen; provided, however, that the designated facility shall possess all required licenses and permits. The collection site will take place in a facility meeting the requirements of 49 C.F.R. 40 Subpart D. The DER will ensure the collection site meets the security requirements of 49 C.F.R. 40.43.

Designated Screening Laboratory

The Board shall designate the laboratory to which collected fluid samples will be forwarded for drug/alcohol screening. Drug testing laboratories must be certified by the Department of Health and Human Services (HHS) under the National Laboratory Certification Program (NLCP) for all testing required under 49C.F.R. 40. The laboratory will perform all responsibilities as required in accordance with 49 C.F.R. 40 Subpart F. Specimens The normal screening methodology for controlled substances shall be urinalysis, collected by a representative of the Board at a designated site. The presence of alcohol will be determined by an Alcohol Screening Device (ASD) or an Evidential Breath Testing Device, administered by an individual certified

PART THREE OF THREE.

Refusal to Submit

A driver will be deemed as refusing to take a drug test as described in with 49 C.F.R. 40.191. As per 49 C.F.R. 40.191, an individual refuses to take a drug test if he/she:

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1. Fails to appear for any test (except a pre-employment test) within a reasonable time, as determined by the DER, consistent with applicable DOT agency regulations, after being directed to do so by the DER;
2. Fails to remain at the testing site until the testing process is complete. An employee who leaves the testing site before the testing process commences for a pre-employment test is not deemed to have refused to test;
3. Fails to provide a urine specimen for any drug test required by this policy. An employee who does not provide a urine specimen because he or she has left the testing site before the testing process commences for a pre-employment test is not deemed to have refused to test;
4. In the case of a directly observed or monitored collection in a drug test, fails to permit the observation or monitoring of providing a specimen;
5. Fails to provide a sufficient amount of urine when directed, and it has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure;
6. Fails or declines to take a second test the DER or collector has directed the individual to take;
7. Fails to undergo a medical examination or evaluation, as directed by the MRO as part of the verification process, or as directed by the DER under Sec. 40.193(d). In the case of a pre-employment drug test, the individual is deemed to have refused to test on this basis only if the pre-employment test is conducted following a contingent offer of employment;
8. Fails to cooperate with any part of the testing process (e.g., refuses to empty pockets when so directed by the collector, behaves in a confrontational way that disrupts the collection process); or
9. If the MRO reports the driver had a verified adulterated or substituted test result. If an individual refuses to participate in a part of the testing process, the collector or MRO, must terminate the portion of the testing process, document the refusal on the CCF (including in the case of the collector, printing the employee's name on Copy 2 of the CCF), immediately notify the DER by any means (e.g., telephone or secure fax machine) that ensures that the refusal notification is immediately received. A referral physician (e.g., physician evaluating a "shy bladder" condition or a claim of a legitimate medical explanation in a validity

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testing situation), must notify the MRO, who in turn will notify the DER. In addition, the collector must note the refusal in the "Remarks" line (Step 2), and sign and date the CCF. The MRO must note the refusal by checking the "refused to test because" box (Step 6) on Copy 2 of the CCF, and add the reason on the "Remarks" line. The MRO must then sign and date the CCF. When the driver

refuses to take a non-DOT test or to sign a non-DOT form, the driver has not refused to take a DOT test. There are no consequences under DOT agency regulations for refusing to take a non-DOT test.

Record of Negative Screening

An employee required to submit to an alcohol and/or controlled substance as provided in this policy and whose screening results are negative may, at their option, have their personnel file documented to reflect the negative result.

Prescription Drugs

All bus drivers shall notify the DER of the use of any prescription drugs. The Board may require certification from the prescribing physician that the use of the prescription drug will not have an adverse affect on the driver's ability to properly perform safety-sensitive functions.

Consequences to Drivers Engaging in Prohibited Conduct

An employee whose fitness-for-duty screening produces a positive result for a prohibited substance:

- A. Shall not be permitted to perform safety-sensitive functions;
- B. Shall be advised by the DER of resources available to them in evaluating and resolving problems associated with the misuse of alcohol or the use of controlled substances;
- C. Shall be evaluated by a substance abuse professional who shall determine what assistance, if any, is needed to resolve problems with alcohol or controlled substance use;
- D. Undergo, before returning to duty, a return to duty alcohol test indicating a breath level of less than 0.02 if the conduct involved alcohol or a controlled substance test with a verified negative result;
- E. If assistance was required, the employee must be evaluated by a substance abuse professional to determine that the driver has followed the rehabilitation program prescribed;

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F. Be subject to unannounced follow up alcohol and/or controlled substance abuse testing;

G. Be subject to the disciplinary policy and regulations of the Board.

Return-to-Work Agreement

An employee who has returned to work and who fails to comply with any of the terms of the Return to Work Agreement shall be subject to termination.

Maintenance and Retention of Records

The DER shall maintain and retain all records as required by federal regulation. Records shall include at least the following:

A. Consolidated annual calendar year summaries.

1. Collection logbooks (if used);
2. Documents related to the random selection process;
3. Calibration documentation for Evidential Breath Testing Devices (EBT's);
4. Documentation of Breath Alcohol Technician (BAT) training;
5. Documentation of reasoning for reasonable suspicion testing;
6. Documentation of reasoning for post-accident testing;
7. Documents verifying a medical explanation for the inability to provide adequate breath or urine for testing; and
8. Consolidated annual calendar year summaries.

B. Records Related to the Driver's Test Results

1. Employer's copy of the alcohol test form, including results;
2. Employer's copy of the drug test chain of custody and control form;
3. Documents sent to the employer by the Medical Review Officer;
4. Documentation of any driver's refusal to submit to a required alcohol or controlled substance test; and S. Documents provided by a driver to dispute results of test.

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C. Documentation of any Other Violations of Controlled Substance Use or Alcohol Misuse Rules

D. Records Related to Evaluations and Training

1. Records pertaining to Substance Abuse Professional's (SAP's) determination of driver's need for assistance;
2. Records concerning a driver's compliance with SAP's recommendations, and records related to education and training;
3. Materials on drug and alcohol awareness, including a copy of the employer's policy on drug use and alcohol misuse;
4. Documentation of compliance with requirement to provide drivers with educational material, including driver's signed receipt of materials;
5. Documentation of supervisor training; and
6. Certification that training conducted under this rule complies with all requirements of the rule.

E. Records Related to Drug Testing

1. Agreements with collection site facilities, laboratories, Medical Review Officers (MRO's) and consortia;
2. Names and positions of officials and their role in the employer's alcohol and controlled substance testing program;
3. Monthly statistical summaries of urinalysis; and
4. The employer's drug testing policy and procedures.

F. Required Period of Retention

Document to be maintained
Period required to be maintained
Alcohol test results 5 Years
indicating a breath alcohol concentration of 0.02 or greater
Verified positive 5 Years
controlled substance test results
Refusals to submit to required alcohol or controlled
substance tests 5 Years (including substituted or adulterated test results)
Required calibration of 2 Years
Evidential Breath Testing Devices (EBT's)
All follow-up tests and 5 Years
schedules for follow-up tests
Substance Abuse 5 Years
Professional's (SAP's)

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evaluations and referrals Annual calendar year 5 Years summary Records related to the 2 Years collection process (except calibration) and required training Negative and canceled 1 Year controlled substance test results Alcohol test results 1 Year indicating a breath alcohol concentration less than 0.02 Records obtained from 3 Years previous employers

concerning alcohol and drug testing

G. Location of Records

All required records shall be maintained in accordance with Policy No. 8320. Records shall be made available for inspection at the Board Offices within two business days after a request has been made by an authorized representative of the Federal Highway Administration.

H. Annual Calendar Year Summary

The DER shall prepare and maintain an annual calendar year summary of the results of its alcohol and substance abuse testing programs. The summary shall be completed no later than March 15 of each year covering the previous calendar year. The DER upon request of the Federal Highway Administration (FHWA) will provide the annual summary to that agency in the required format.

I. Employee Information Program

The Board will provide an employee information program. The DER will be responsible for implementing the program and shall ensure that each driver receives information in the manner specified below:

1. By receiving a copy of this policy and any subsequent revisions.
2. Through attendance at a meeting at which a detailed discussion of the following is conducted:
 - a. The identity of the person designated by the employer to answer driver questions about the materials;
 - b. Which drivers are subject to the alcohol misuse and controlled substance requirements;
 - c. Explanation of what constitutes a safety-sensitive function, so as to make clear what period of the workday the driver is required to be in compliance;
 - d. Specific information concerning driver conduct that is prohibited;

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- e. The circumstances under which a driver will be tested for alcohol and/or controlled substances;
- f. The procedures that will be used to test for the presence of alcohol and controlled substances;
- g. The requirement that a driver submit to alcohol and controlled substance tests;
- h. An explanation of what constitutes a refusal to
- i. The consequences for drivers found to have violated the prohibitions of this rule, including the immediate removal of the driver from safety-sensitive functions;
- j. The consequences for drivers found to have an alcohol concentration level of 0.02 or greater but less than 0.04;
- k. Information concerning the effects of alcohol and controlled substances use on an individual's health, work, and personal life. Signs and symptoms of an alcohol or controlled substances problem, and available methods of intervening when an alcohol or a control substances problem is suspected, including confrontation, referral to any employee assistance program and or referral to management.

Omnibus Transportation Act of 1991 O 49 C.F.R. 40 et seq. 49 C.F.R. 382 et seq.
49 C.F.R. 395.2 Cross reference: Policy Guide Nos. 4125, 4150, 4160, 4218,
8320

Adopted: February 8, 1995
Revised: January 15, 2003

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POST REHABTTTATTON RETURN TO WORK AGREEMENT

1. I understand that my previous job performance warrants close supervision for an extended period of time upon my return to work and I will accept such supervision as a constructive part of my recovery.
2. I understand that upon return to the Delanco Board of Education I must meet all established standards of conduct and job performance and that I will be subject to the Board's disciplinary procedures for any failure to meet those standards.
3. For a period of one (1) calendar year after the date of reinstatement to my position I will be subject to six (6) random drug tests at the sole discretion of the Board. The Board shall pay the cost of such tests.
4. I agree that I shall cooperate fully with any and all Board requests to submit to any random drug tests. I further acknowledge and understand that if I fail to cooperate fully to submit to such drug tests when requested, such failure will be cause for immediate termination.
5. In the event that any of my drug tests indicate a positive reading which disclose that I have used any of the prohibited substances identified in Item 1 of this agreement, I will be terminated.
6. I understand that I will be subject to the stated rules and conditions for twelve (12) calendar months upon completion of the twelve (12) calendar months, the provisions of Items 3 and 4 of this post rehabilitation return to work agreement shall become null and void.
7. If after this Post Rehabilitation Return to Work Agreement has lapsed, I am involved in a second incident resulting in a positive reading from a drug/alcohol screening, I will be terminated.

I understand and agree that my reinstatement and continued employment are contingent upon my satisfying all of the above rules and conditions of employment and that my failure to do so subjects me to immediate termination of my employment with the Board of Education.

NAME _____ DATE_____

SIGNATURE_____ POSITION _____

WITNESS _____ DATE _____

WITNESS SIGNATURE _____

WITNESS POSITION _____

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I hereby certify that I have received on this date, _____, a copy of the Board policy on Commercial Driver Controlled Substances and Alcohol Use Testing. I further agree to abide by the provisions of said policy.

NAME: _____

POSITION: _____

DATE: _____

SIGNATURE: _____

WITNESS NAME: _____

WITNESS POSITION: _____

DATE: _____

WITNESS SIGNATURE: _____

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FEDERAL FORM

U.S. Department of Transportation (DOT)
Breath Alcohol Testing Form

(THE INSTRUCTIONS FOR COMPLETING THIS FORM ARE ON THE BACK OF COPY 3)

• STEP 1: TO BE COMPLETED BY BREATH ALCOHOL TECHNICIAN

A. Employee Name _____
(PRINT) (First, M.I., Last)

B. SSN or Employee ID No _____

C. Employer Name _____
Address, & _____
Telephone No _____

Telephone Number

D. Reason for Test: Pre-employment Random Reasonable Suspicion/Cause Post-accident Return to Duty Follow-up

• STEP 2: TO BE COMPLETED BY EMPLOYEE

I certify that I am about to submit to breath alcohol testing required by U.S. Department of Transportation regulations and that the identifying information provided on this form is true and correct.

Signature of Employee

_____/_____/_____
Date Month Day Year

• STEP 3: TO BE COMPLETED BY BREATH ALCOHOL TECHNICIAN

I certify that I have conducted breath alcohol testing on the above named individual in accordance with the procedures established in the U.S. Department of Transportation regulation 49 CFR Part 40, that I am qualified to operate the testing devices identified, and that the results are as recorded.

Screening test: Complete only if the testing device is not designed to print the following

Test No	Testing Device Name	Testing Device Serial Number	Time	AM PM	Result

Confirmation test: Confirmation test results **MUST** be affixed to the back of each copy of this form.

Remarks: _____

(PRINT) Breath Alcohol Technician's Name (First, M.I., Last) Signature of Breath Alcohol Technician Date Month Day Year

• STEP 4: TO BE COMPLETED BY EMPLOYEE

I certify that I have submitted to the breath alcohol test the results of which are accurately recorded on this form. I will not perform safety-sensitive duties, or operate heavy equipment if the results are 0.02 or greater.

Signature of Employee

_____/_____/_____
Date Month Day Year

COPY 1 - ORIGINAL - FORWARD TO THE EMPLOYER

OMB No. 2105-0529
Exp. Date 02/28/97

DELANCO TOWNSHIP BOARD OF EDUCATION

FEDERAL DRUG TESTING CUSTODY AND CONTROL FORM

FEDERAL FORM

SPECIMEN ID NO.

LABORATORY ACCESSION NO.

STEP 1: TO BE COMPLETED BY COLLECTOR OR EMPLOYER REPRESENTATIVE

<p>A. Employer Name, Address and I.D. No. _____</p>	<p>B. MRO Name and Address _____</p>
<p>C. Donor SSN or Employee I.D. No. _____</p>	
<p>D. Reason for Test: <input type="checkbox"/> Pre-employment <input type="checkbox"/> Random <input type="checkbox"/> Reasonable Suspicion/Cause <input type="checkbox"/> Post Accident <input type="checkbox"/> Return to Duty <input type="checkbox"/> Follow-up <input type="checkbox"/> Other (specify) _____</p>	
<p>E. Tests to be Performed: <input type="checkbox"/> THC, Cocaine, PCP, Opiates and Amphetamines <input type="checkbox"/> Only THC and Cocaine <input type="checkbox"/> OTHER (specify) _____</p>	

STEP 2: TO BE COMPLETED BY COLLECTOR - Specimen temperature must be read within 4 minutes of collection

Specimen temperature within range: Yes, 90° - 100°F/32° - 38°C No, Record specimen temperature here _____

STEP 3: TO BE COMPLETED BY COLLECTOR AND DONOR - Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s).

STEP 4: SEE BELOW

STEP 5: TO BE COMPLETED BY COLLECTOR - RETURN TO COPY 1

COLLECTION SITE LOCATION:		SPLIT SPECIMEN COLLECTION <input type="checkbox"/> YES <input type="checkbox"/> NO
Collection Facility _____	Collector's Business Phone No _____	
Address _____	City _____ State _____ Zip _____	
REMARKS: _____ <small>I certify that the specimen identified on this form is the specimen presented to me by the donor providing the certification on Copy 4 of this form, that it bears the same specimen identification number as that set forth above, and that it has been collected, labeled and sealed as in accordance with applicable Federal requirements.</small>		
(PRINT) Collector's Name (First, MI, Last) _____	Signature of Collector _____	Date (Mo / Day / Yr) _____ Time _____

STEP 6: TO BE INITIATED BY THE COLLECTOR AND COMPLETED AS NECESSARY THEREAFTER

MO	DATE	DAY	YR.	SPECIMEN RELEASED BY	SPECIMEN RECEIVED BY	PURPOSE OF CHANGE
//	//	//	//	DONOR - NO SIGNATURE	Signature _____ Name _____	PROVIDE SPECIMEN FOR TESTING
//	//	//	//	Signature _____ Name _____	Signature _____ Name _____	
//	//	//	//	Signature _____ Name _____	Signature _____ Name _____	
//	//	//	//	Signature _____ Name _____	Signature _____ Name _____	

STEP 4: TO BE COMPLETED BY DONOR

Daytime Phone No. <input type="text"/>	Evening Phone No. <input type="text"/>	Date of Birth Mo / Day / Yr _____
I certify that I provided my urine specimen to the collector, that I have not adulterated it in any manner, that each specimen bottle used was sealed with a tamper-evident seal in my presence and that the information provided on this form and on the label affixed to each specimen bottle is correct.		
(PRINT) Donor's Name (First, MI, Last) _____	Signature of Donor _____	Date (Mo / Day / Yr) _____
Should the results of the laboratory tests for the specimen identified by this form be confirmed positive, the Medical Review Officer will contact you to ask about prescriptions and over-the-counter medications you may have taken. Therefore, you may want to make a list of those medications as a "memory jogger." THIS LIST IS NOT NECESSARY if you choose to make a list, do so either on a separate piece of paper or on the back of your copy (Copy 5).—DO NOT LIST ON THE BACK OF ANY OTHER COPY OF THE FORM. TAKE COPY 5 WITH YOU.		

STEP 8: TO BE COMPLETED BY THE MEDICAL REVIEW OFFICER

I have reviewed the laboratory results for the specimen identified by this form in accordance with applicable Federal requirements. My determination/verification is:

Negative Positive Test Not Performed Test Cancelled

REMARKS: _____

(PRINT) Medical Review Officer's Name (First, MI, Last) _____ Signature of Medical Review Officer _____ Date (Mo / Day / Yr) _____

COPY 7 FORWARD TO EMPLOYER - DO NOT SEND TO LABORATORY