



**Peace Academy Consent Form for Drug/Alcohol Testing 2019-2020**

I/We have read and understand the Peace Academy School Substance Abuse Policy and further understand that it is the practice of the school to conduct drug and/or alcohol testing for the purpose of carrying out this policy.

As parent(s)/guardian(s) I/we understand that the school will request a hair sample of each Peace Academy student and all transfer students in grades 6-12 for the purpose of drug and/or alcohol screening at least once during the school year (fingernails or saliva sample will be used in case of very little hair until arrangements to collect hair can be made). I/we agree that our son/daughter will submit a sample upon request.

As parent(s)/guardian(s) I/we understand that I/we are responsible for paying an annual fee for drug and/or alcohol testing due with registration fees (check with the office for the updated fee).

As a student I understand that the school will request a hair sample from me for the purpose of drug and/or alcohol screening (Fingernails or saliva sample will be used in case of very little hair until arrangements to collect hair can be made). I agree to submit a sample upon request.

I/We authorize the designated school administrators as outlined in the Peace Academy Substance Abuse Policy to access my son's/daughter's test results from the drug testing company.

We hereby release and hold harmless Peace Academy School and its Board of trustees, staff, employees, agents, and representatives from any and all liability, claims, damages, and costs that may arise as a result of any action that occurs as a result of my son's/daughter's drug testing.

We hereby authorize Peace Academy School to conduct drug and/or alcohol testing in accordance with the school's Substance Abuse Policy.

We understand that choosing not to sign this consent form renders a student ineligible for enrollment at Peace Academy School.

\_\_\_\_\_  
Printed Name of Student

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date