

DRUG TESTING AGREEMENT

As a participant of the Jefferson and Lincoln County Juvenile Drug Court, I understand that I am required to provide a urine and/or breath sample at any time upon request by any member of the drug treatment court team. Such screens are conducted for the purpose of determining the presence of mood altering substances.

I understand and agree to the following conditions:

1. I am to provide a urine sample that is my own and that all urine screens are to be observed by a same-sex member of the drug team.
2. Attempts to adulterate a urine sample (including dilution) are considered a violation and will result in sanctions being imposed.
3. Urine samples must be submitted within thirty (30) minutes of request or they are considered positive. If at group time, a urine sample that is not submitted within thirty (30) minutes after the scheduled start of group will be considered positive.
4. The taking of another person’s prescribed medication is a program violation subject to sanctions being imposed. Furthermore, should I be prescribed medication from my own physician, I will advise my probation officer or counselor immediately of this fact. I will refrain from taking over the counter medications and products (including mouthwash) that contain alcohol. Participants should also refrain from the use of fool products that contain poppy seeds.
5. I understand that I am to avoid being take out in the presence of the use of illegal substances. I am aware that my failure to remove myself from such situations may result in the imposition of sanctions.
6. I understand that drug testing is performed using on-site testing equipment or other approved drug testing devices. Should a urine sample be required to be sent to the laboratory for a confirmation test, I will be assessed the costs of the test. Should the confirmation test return negative, I understand that I will not be assessed any fee for the test.

I have read the above and/or have had the above read to me and understand the drug testing requirements of the Jefferson and Lincoln County Juvenile Court.

Participant Signature

Date

Parent/Guardian Signature

Date

Drug Court Staff Signature

Date