

**JHS/FTC CODE OF CONDUCT AND DRUG TESTING POLICY FOR
EXTRA-CURRICULAR AND CO-CURRICULAR ACTIVITIES, CLUBS, AND ORGANIZATIONS
CONSENT FORM**

The complete JHS/FTC Code of Conduct and Drug Testing policy can be found on our website at joplineagles.org or a hard copy can be requested from the Athletic Department by calling 417-625-5242.

APPROVED BY THE JOPLIN BOARD OF EDUCATION

This signed consent form shall be valid for all covered activities and will remain effective until revoked in writing by the parent/guardian.

Participant Name (Print): _____ Grade: _____

Date of Birth: _____

I, the undersigned participant in the extra-curricular, co-curricular, clubs, and organizations (activities) program in the Joplin School District, Joplin, Missouri, am willing and consent to take a drug-screening test in accordance with District policies and procedures. I understand the restrictions that would be imposed on me for failure to consent to the drug-screening test. I also understand that the results of such tests will be considered toward determining my continued eligibility for participation in extra-curricular and/or co-curricular activities, clubs, and organizations.

I consent to allow a specimen of my urine to be collected by the drug testing collection agency designated by Joplin Schools and to have a drug testing collection agency and/or testing laboratory designated by the District perform a substance abuse analysis on the specimen. I also consent to the release of the results of the analysis by the drug testing collection agency and/or testing laboratory to the authorized district personnel via electronic or other means, i.e., telephone, teleprinter, facsimile, computer, etc.

My signature below signifies that I have received access, read and understand Joplin Schools Extra-Curricular, Co-Curricular, and Clubs, and Organizations Code of Conduct; and consent to a random drug test. In the event of a positive result, I also consent to another drug test prior to being readmitted to the activity.

Signature of Student Participant: _____ Date: _____

My signature below signifies that I have received access, read and understand Joplin Schools Extra-Curricular, Co-Curricular, and Clubs, and Organizations Code of Conduct; and consent to a random drug test for my child.

Signature of Parent/Guardian: _____ Date: _____

This form must be signed and returned to the JHS Athletic Office by the **first Tuesday in September by all Sophomore, Junior and Senior students planning to participate in any activity at JHS/FTC (unless they already have one on file.)** Freshmen students may enter the program at anytime during their Freshman year **prior** to participation in an activity.

Clarification:

- Calendar day is to be considered during the regular school term and summer school.
- Refusal to submit also implies failure to appear after receiving notification.