Harney County School District 3

Code: **JFCIA-AR(2)**Revised/Reviewed: 6/29/04; 8/13/13
Orig. Code(s): JFCIA-AR

Student Athlete Drug Testing Consent Form

I understand that my performance as an athlete and the reputation of my school and community is dependent, in part, on my conduct as an individual. I hereby agree to accept and abide by the standards, rules and regulations set forth by the Harney County School District No. 3 Board.

I authorize the Harney county School District No. 3 to conduct a test for the use of illegal or performance-enhancing drugs and alcohol through the collection of a personal specimen. I also authorize the release of information concerning the results of the test to the district, to designated school officials, and to my parent(s) and/or legal guardian.

This shall be deemed consent pursuant to the Family Educational Rights and Privacy Act for the release of the above information to the parties named above.

I have received a copy of this release. I have read and understand the district policy and

procedures.			
Student Signature		Date	
Parent/Legal Guardian Signature		Date	
	Harney County School District No. 3 Drug Testin stances:	g Program currently tests for the follow	ing
1.	Alcohol;		
2.	Cocaine;		
3.	Amphetamine/methamphetamine;		
4.	THC/marijuana;		
5.	Opiates/opioids.		

The substances that are tested are subject to review and period changes may occur. Prior notification will be made to students upon any change in the above listed substances.