



Pike Liberal Arts School

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Consent to Perform Drug Testing

We hereby consent to allow the student named at the bottom of this form to undergo drug testing for the presence of illicit drugs/banned substances and drug masking agents/compounds in accordance with the Policy and Procedure for Random Drug Testing of Pike Liberal Arts School students, as approved by the Pike Liberal Arts School Board of Trustees.

We understand that the collection process will be overseen by a qualified vendor.

We understand that any samples will be sent only to a certified medical laboratory for actual testing, and that the samples will be coded to provide confidentiality.

We hereby give our consent to the medical vendor selected by the Pike Liberal Arts School Board of Trustees, its doctors, employees, or agents to release all results of these tests to the Medical Review Office (MRO) working for the vendor. We understand these results will be forwarded to the headmaster and will also be made available to us.

We understand that consent pursuant to this informed Consent Agreement will be effective for all attendance during the current school year.

We hereby release the Pike Liberal Arts School, Inc., its Board of Trustees and its employees from any legal responsibility or liability for the release of such information and records.

Student Name

Grade

Parent/Guardian/Custodian Signature

Date

Parent/Guardian/Custodian Signature

Date