

## **CITY OF PLANO**

## PRE-EMPLOYMENT AND RANDOM DRUG SCREEN CONSENT AND RELEASE FORM

I, as parent or legal guardian of	, a
minor under 18 years of age, consen	t and give my permission for my child to take the pre-
employment drug test required for all	new employees with the City of Plano. I understand and
agree that my child must pass the test	prior to final consideration for employment with the City of
Plano. I understand that the position m	y child is being considered for is a safety sensitive position
and if hired, my child will participate in t	he City's mandatory random drug test. I understand that
if selected to participate, failure to par	ticipate in the random drug test will be considered as an
administrative positive and my child wil	I be subject to termination.
We, the undersigned, understand and a	agree that the Applicant and the Applicant's parent or legal
guardian fully and completely release	the City of Plano, its employees, officers, and agents, of
and from any and all rights, claims, action	ons, demands, damages or liabilities arising out of the pre-
employment drug screening, random of	drug screening, or the enforcement of the City of Plano's
Substance Abuse Policy.	
Applicant Signature	Parent or Legal Guardian Signature
Date	Date
Printed Name	Printed Name
Applicant's Date of Birth	Street Address
	City, State, Zip Code
	Telephone Number