

DRUG TESTING CONSENT FORM

I have applied for employment with Humane Home Care Agency, LLC. As a condition for my application being considered, I understand and agree to undergo substance screening. **I understand that if my test results are positive, I shall not be considered further by the Company for employment.**

I hereby authorize Humane or any medical professional retained by Humane for screening purposes to conduct such screening and to provide such results to Humane. I release Humane and any person affiliated with Humane and any such institution or person conducting the screening from liability.

Applicant Signature _____

Date _____

Applicant Printed Name _____