

LAPWAI SCHOOL DISTRICT NO. 341

DRUG FREE WORKPLACE ACKNOWLEDGEMENT

Acknowledgement of the Lapwai School District's Drug-Free Workplace Policy and Procedure.

Employee Name (Please Print)

Job Assignment

I acknowledge that I have read and understand the Drug-Free Workplace Policy of Lapwai School District #341. Any concerns with the Program have been discussed with my supervisor for clarification.

Employee Signature

Date