



### APPLICANT DRUG TESTING CONSENT AGREEMENT

As a prerequisite to employment, I hereby agree to allow Workaway International to collect urine samples from me to determine the presence of illegal drugs in my body. Further, I give my consent to release my test results to authorized Workaway International management for appropriate review, and authorize Workaway International to use the test results as a defense to any legal action to which I am a party.

I understand that the results of the drug testing of my urine, if confirmed positive, will remove me from consideration for employment. I also understand that if I refuse to consent, I will be removed from further consideration of employment.

Further, I understand that, if employed by a Country Club, I must abide by the terms of the Country Club's drug-free work place policy and may be required to submit to testing for the presence of illegal drugs or alcohol. I understand that submission to such testing is a condition of employment with the Country Club, and disciplinary action, up to and including discharge, may result if (1) refuse to consent to such testing; (2) I refuse to execute all forms of consent and releases of liability as are usually and reasonably attendant to such examination; (3) I refuse to authorize release of the test results to the Country Club (if the tests establish a violation of the Country Club's drug-free work place policy); or (4) I otherwise violate the policy.

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I hereby **consent** to the administration of the drug test and to the terms and conditions of the Consent Agreement.

Applicant Last Name: \_\_\_\_\_

Applicant First Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Identity number: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / 2020

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I hereby **refuse** the drug detection urine test.

Applicant Last Name: \_\_\_\_\_

Applicant First Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Identity number: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / 2020