

**Employee Acknowledgement Form**  
**Drug and Alcohol Free Workplace**  
(Drug and Alcohol Use by Staff Members)

I, THE UNDERSIGNED EMPLOYEE OF LAKE GEORGE CHARTER SCHOOL, have received a copy of the Policy GBEC, Drug and Alcohol Free Workplace and Policy GBEC-R Drug and Alcohol Free Workplace.

1. \_\_\_\_ I agree to abide by the terms of the policy.
2. \_\_\_\_ I understand that I may be subject to an alcohol or controlled substance test upon reasonable suspicion per policies GBEC and GBEC-R.
3. \_\_\_\_ I agree to notify my immediate supervisor if I am convicted of violating a criminal drug statute in the workplace no later than five days after the date of such conviction.
4. \_\_\_\_ Violation shall subject the employee to appropriate disciplinary action, up to and including termination and referral for prosecution.

(Please initial each line above and print, sign, and date below.)

Employee Name (print): \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

First Reading Date: 4-9-19

Adoption Date: 5-14-19

Lake George Charter School