



PLEASE READ CAREFULLY

Drug Test Consent Form

*Consent for Pre-Employment, Random or Reasonable Suspicion Drug Test and Release
Covenant not to Sue and Indemnity Agreement*

I hereby consent to allow Comprehensive Medical Staffing or its affiliate companies to take a specimen of my hair, urine, or blood and submit it for a pre-employment, random, or reasonable suspicion drug test. **I further consent** to allow the laboratory testing service to make the results of such screen available to prospective or current employer, Comprehensive Medical Staffing, and its affiliate companies.

In consideration for such services being rendered on my behalf, I hereby **release** the laboratory testing service, its officers, agents and employees from any and all claims, which I might otherwise have due to such results being made available. I hereby **consent not to file any action at law or in equity** against Comprehensive Medical Staffing and its affiliate companies, the laboratory testing service, the respective officers, agents or employees in connection with the results of such screen being made so available and I hereby agree to **Indemnify and Hold Harmless** Comprehensive Medical Staffing, and its affiliate companies, and the laboratory testing service, the respective officers, agents or employees from all damages, expenses, reasonable attorney's fees, and costs of court which they or any of them may suffer or incur, jointly or severally, due to the results of such screen being made so available.

I am also aware that a positive result on any one of the test panels will result in disqualification from obtaining a position with Comprehensive Medical Staffing and its affiliate companies.

Signed this _____ day of _____, 200_____.

Current Medications
Prescription & Non Prescription:

(Signature)

(Print Name)

Applicant Social Security Number
____-____-____