Purpose and Intent: In an effort to protect the health and safety of its students from illegal and/or performance-enhancing drug use and abuse, the Board adopts the following policy for drug testing of students who participate in competitive extra-curricular activities ("Activity Students") as well as any other student who voluntarily wishes to be tested. This policy supplements and complements all other policies, rules, and regulations of the District regarding possession or use of illegal and/or performance-enhancing drugs. The District believes that accountability is a powerful tool to help students avoid using illegal and/or performance-enhancing drugs and that early detection and intervention can save students’ lives.

Although the Board, administration, and staff desire that every student in the District refrain from using or possessing illegal drugs, District officials realize that their power to restrict the possession or use of illegal and/or performance-enhancing drugs is limited. Therefore, this policy governs performance-enhancing and/or illegal drug use by students participating in competitive extra-curricular activities and those who voluntarily participate in the drug testing program. The sanctions imposed for violations of this policy by an Activity Student will be limited to the opportunity of such student to exercise the privilege of participation in competitive extra-curricular activities. No suspension from school or academic sanctions will be imposed for violations of the policy.

The purposes of this policy are five-fold:

1. To educate students as to the serious physical, mental, and emotional harm caused by illegal and/or performance-enhancing drug use.
2. To alert students with possible substance-abuse problems to the potential harm that drug use poses for their physical, mental and emotional well-being and offer them the privilege of competition as an incentive to stop using such substances.
3. To ensure that students adhere to a training program that bars the intake of illegal and/or performance-enhancing drugs.
4. To prevent injury, illness, and harm for students that may arise from illegal and/or performance-enhancing drug use.
5. To offer students practices, competition and school activities free of the effects of illegal and/or performance-enhancing drug use.

Procedures:

1. Consent Form: Activity Students:

Each Activity Student shall be provided with a copy of the form "Student Drug Testing Consent: Activity Student" which shall be read, signed, and dated by the student, parent or guardian, and coach/sponsor before such student shall be eligible to practice or participate in any competitive extra-curricular activities. The consent requires Activity Students to provide a urine sample and submit to drug testing.

2. Consent Form: Non-Activity Students:

Non-Activity Students participating in the District’s drug testing program shall be provided a copy of the form "Student Drug Testing Consent: Non-Activity Student." No coach/sponsor signature required.

3. Orientation:

Prior to the commencement of drug testing each year, an orientation session will be held to educate Participating Students of the sample collection process, privacy arrangements, drug testing procedures, and other areas which may help to reassure the students and help avoid embarrassment or uncomfortable feelings about the drug testing process.
4. Testing:

Drug use testing for Participating Students will be chosen on a random selection basis from a list of all Participating Students. The District will determine a number of Participating Student names to be drawn at random to provide a urine sample for drug use testing for illegal drugs and performance-enhancing drugs. An initial positive test will be subject to confirmation by a second and different test of the same specimen.

Confidentiality:

The laboratory will notify the principal/athletic director or designee of any positive test. To keep the positive test results confidential, the principal/athletic director or designee will only notify the student, the head coach/sponsor (if applicable), and the parent or custodial guardian of the student of the results. Test results will be kept in files separate from the student’s other educational records, shall be disclosed only to those school personnel who have a need to know, and will not be turned over to any law enforcement authorities.

Appeal:

An Activity Student who has been determined by the principal/athletic director to be in violation of this policy shall have the right to appeal the decision to the Superintendent or his/her designee(s). Such request for a review must be submitted to the Superintendent in writing within five (5) calendar days of notice of the positive test.

Consequences:

First Offense: Within 2 school days of receipt of a positive test result, the District will contact and schedule a private conference with the parent/guardian to present the test results to the parent/guardian. A student with a positive drug test will be suspended from participating in any meetings, practice, scrimmages, or competitions for extra-curricular activities for five (5) school days. After the (5) day suspension, in order to continue participation in the activity, the student and parent/guardian must provide proof to the principal that the student has received drug counseling from a qualified drug treatment program or counseling entity.

Second Offense: (same calendar year): A student with a second positive drug test will be suspended from participating in any meetings, practice, scrimmages, or competitions for extra-curricular activities for ten (10) school days. After the ten (10) day suspension, in order to continue participation in the activity, the student and parent/guardian must provide proof to the principal that he/she is actively participating in a program for substance abuse education/counseling from a qualified drug treatment program or counseling entity.

Third Offense: (same calendar year): An Activity Student who commits a third offense under this policy will be suspended from participation in all extra-curricular activities including all meetings, practices, performances, and competition for the remainder of the school year or eight-eight (88) school days (one semester) whichever is longer. Parents should strongly consider additional assistance from outside sources, including, but not to be limited to, the possibility of drug treatment centers.

Refusal to Submit to Drug Use Test:

A Participating Student who refuses to submit to a drug test authorized under this policy shall not be eligible to participate in any activities covered under this policy, including all meetings, practices, performance and competitions for the remainder of the school year. Additionally, such students shall not be considered for any interscholastic activity honors or awards given by the District.
PUTNAM CITY SCHOOLS: DISTRICT FORM

STUDENT DRUG TESTING CONSENT:
ACTIVITY STUDENTS

Student Printed Name: ___________________________ Grade: ___________________________
Student ID Number: ___________________________ Date of Birth: ___________________________
Graduation Year: ______________________________
Activity: ______________________________________

Student Consent:

I have read and understood the “Student Drug Testing Policy” and “Student Drug Testing Consent.” I understand that, out of care for my safety and health, District enforces the rules applying to the consumption or possession of illegal and/or performance-enhancing drugs. If I choose to violate school policy regarding the use or possession of illegal and/or performance-enhancing drugs any time while I am involved in in-season or off-season activities, I understand upon determination of that violation I will be subject to the restrictions on my participation as outlined in the Policy.

_____ YES, I CHOOSE TO PARTICIPATE IN THE DRUG TESTING PROGRAM.

_____ NO, I CHOOSE NOT TO PARTICIPATE IN THE DRUG TESTING PROGRAM.

Note: By selecting not to participate in the Drug Testing Program, I understand that I will not be able to participate in any activity covered under this policy.

Student Signature: ___________________________ Date: ____________________________

Parent Consent:

I have read and understood the Student Drug Testing Policy and Student Drug Testing Consent. I desire that the student named above participate in the extra-curricular interscholastic programs of District, and I hereby voluntarily agree to be subject to its terms. I accept the obtaining of saliva samples, testing and analysis of such specimens, and all other aspects of the program. I further agree and consent to the disclosure of the sampling, testing and results as provided in this program.

_____ YES, I AGREE TO THE TERMS OF THIS POLICY.

_____ NO, I DO NOT WANT MY SON/DAUGHTER TO BE TESTED ACCORDING TO THE TERMS HIS POLICY.

Note: By selecting not to participate in the Drug Testing Program, I understand that the student named above will not be able to participate in any activity covered under this policy.

Printed Parent/Guardian Name: ___________________________

Parent/Guardian Signature: ___________________________ Date: ____________________________

7/14, 11/14