

**BOARD OF TRUSTEES  
CARSON CITY SCHOOL DISTRICT**

**REGULATION No. 534 Appendix C  
STUDENTS**

**CARSON HIGH SCHOOL CONSENT TO PERFORM  
URINALYSIS FOR DRUG TESTING**

We hereby consent to allow the student named on the front of this form to undergo urinalysis testing for the presence of illicit drugs or banned substances in accordance with the **Regulation and Procedure for Random Urine Drug Testing of Carson High School Student Athletes** as approved by the Carson City School District. We understand that a refusal to test will be handled as a positive test.

We understand that the collection process will be overseen by a qualified vendor.

We understand that any urine samples will be sent only to a certified medical laboratory for actual testing, and that the samples will be coded to provide confidentiality.

We hereby give our consent to the medical vendor selected by Carson High School, their laboratory, doctors, employees, or agents, together with any clinic, hospital, or laboratory designated by the selected medical vendor to perform urinalysis testing for the detection of illicit drugs or banned substances.

We further give permission to the medical vendor selected by Carson High School, its doctors, employees, or agents, to release all results of these tests to the Medical Review Officer (MRO) working for the medical vendor. We understand these results will be forwarded to the Building Principal and will also be made available to us.

We understand that consent pursuant to this **Informed Consent Agreement** will be effective for all activities in which this student might participate during the current school year.

We hereby release Carson High School, Carson City School District and the Carson City School District Board of Trustees, SPORT SAFE Testing Service, Inc. and its employees from any legal responsibility or liability for the release of such information and records.

**Carson High School**

**Confidentiality Statement for Random Urine Drug Testing Program**

I, \_\_\_\_\_, acknowledge that I will be privileged to hear and see sensitive information related to results of random urine drug testing performed on students of Carson High School. I pledge to keep any information given to me in strict confidence, and will only release this information to others as dictated by the regulation or with properly obtained permission of the student and parent/guardian/custodian.

\_\_\_\_\_  
Principal or Administrative Designee Signature

\_\_\_\_\_  
Date

Adopted: May 12, 2009  
Revised: October 9, 2012 - Title Change