

**Riverton Unified School District #404  
Student Drug Testing Consent Form**

**Policy Statement**

The Riverton Unified School District #404 Board of Education, in an effort to protect the health and safety of its students from illegal and/or performance-enhancing drug use and abuse or injuries resulting from the use of drugs, and to set an example for all other students of Riverton Unified School District #404, had adopted the "Student Drug Testing Policy" for drug testing of students participating in extracurricular and/or co-curricular activities, including dances.

**General Authorization Form**

I have read and understand the Riverton Unified School District #404's "Student Drug Testing Policy."

I understand fully that my safety and the safety of my teammates and classmates depend upon my conduct as an individual. I hereby agree to accept and abide by the standards, rules and regulations set forth by the Riverton Unified School District #404 and the coaches and/or sponsors for the extracurricular and/or co-curricular activities, including dances in which I participate.

I also authorize Riverton Unified School District #404 to conduct a test on a urine specimen, which I provide to test for drugs and/or alcohol use. I authorize the release of information concerning the results of such a test to Riverton Unified School District #404 and the parent and/or guardian.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Address

Date Signed \_\_\_\_\_