



Western Maryland Joint Apprenticeship & Training Committee
 Electrical Workers Training Center
 307 East Offutt Street
 Cumberland, MD 21502



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 wmjadc@atlanticbbn.net



CONSENT AND RELEASE

I, _____, have read and understand, and consent to the Substance Abuse Policy of the Western Maryland JATC.

As an applicant for employment with the Western Maryland JATC, or as an apprentice of the Western Maryland JATC, I understand that I am subject to Substance Testing as described in the Policy, and I consent to such test. In addition, I authorize the laboratory conducting the Substance Testing to release the results of my test to the Western Maryland JATC, to the attention of the Drug Coordinator, and to the Committee's medical review officer.

I understand that my refusal to submit to any Substance Testing required by the Substance Abuse Policy, or by my violation of any of the terms of that Policy, is grounds for the Committee's refusal to hire me or for the termination of my apprenticeship agreement with them as stated in the Substance Abuse Policy.

 Signature

 Date

 Social Security No.