

SAMPLE DRUG AND ALCOHOL POLICY

CONSULT WITH COUNSEL

This sample Drug and Alcohol Policy should be reviewed by your legal counsel before being used in whole or in part as it may not fit your specific needs or circumstances. Your legal counsel may determine that your interests are best served by use of alternative forms or a modification of this form.

* This sample form is also available in Spanish on our website:

SIFsafety.com

MUESTRA DE POLÍTICA SOBRE ALCOHOL Y DROGAS

CONSULTE CON UN ABOGADO

Esta muestra de Política de Drogas y Alcohol debería ser revisada por su abogado antes de usarla en su totalidad o en parte ya que puede que no encaje para sus necesidades o circunstancias específicas. Su abogado puede determinar que a sus intereses les va mejor el uso de formularios alternativos o una modificación de este formulario.

* Este formulario de muestra está también disponible en español en nuestra página web:

SIFsafety.com

DRUG AND ALCOHOL POLICY

The Company has established this drug and alcohol policy (THE POLICY) to promote a safe and healthy working environment, to protect property, and to facilitate productive and efficient operations.

The use of alcohol and other intoxicating substances during work and either on or off duty use of a non-prescribed controlled substance as defined in 21 U.S.C. 812, Schedules I, II, III, IV, and V is prohibited. Any employee found intoxicated or impaired by any drug or alcohol, while working, will be subject to discipline, including discharge. If an employee is injured while intoxicated, it may preclude the employee's ability to receive workers' compensation benefits, as set forth in La. R.S. 23:1081.

The consumption, use, possession, concealment, transportation, promotion or sale of the following items or substances by a Company employee, or by any employee of a subcontractor for the Company, is strictly prohibited when working on all Company work sites and premises, and when traveling in the course and scope of employment:

- A. Illegal drugs, controlled substances (including trace amounts), look-alike drugs, designer drugs, or any other substance which may have the effect on the human body of being a narcotic, depressant, stimulant, hallucinogen or cannabinoid (herein called “drugs”);
- B. Unauthorized alcoholic beverages;
- C. Prescription drugs when used without a valid prescription or in a manner contrary to the prescription; and
- D. Prescription drugs or over the counter medications when used in a manner that leads to intoxication or otherwise impairs the safe performance of job duties by the employee.

Also prohibited is reporting for work, with any detectible quantity of any illegal drug or alcohol in the employee's system.

“Company work sites and premises” includes all locations at which work is performed by any employee or subcontractor of the Company or which are assigned to any employee for use by a customer or other contractor, including parking lots and storage areas. It also includes aircraft, boats, automobiles, trucks and all other vehicles and equipment used to perform work for the Company.

Employees on Company work sites and premises who are using prescription drugs, which may cause intoxication or impairment, must notify their supervisor, prior to beginning work, of the identity and dosage of such prescription drugs. The Company at all times reserves the right to have a physician determine if a prescription drug or other product produces effects that would impair the employee's ability to safely and adequately perform his/her work duties, and the

Company may restrict work activities or the use of any drug or product by the employee when working and/or otherwise present on Company work sites or premises.

DRUG AND ALCOHOL TESTING

The Company may, in its discretion, require and utilize any lawful drug and alcohol test or other approved medical testing procedures to help in the control or detection of drug or alcohol usage. These tests **may** be utilized in, but are not limited to, the following circumstances:

1. Pre-employment examinations;
2. Re-entrance or return to work examinations;
3. Employee physicals;
4. When the Company has a reasonable suspicion that the employee is impaired, intoxicated, or may be working under the influence of drugs or alcohol;
5. Following any alleged job-related accident or injury; and
6. Random selection.

The results of these tests will be kept confidential to the extent required by law. Upon written request, an employee confirmed positive may review records relating to his/her drug tests and results within seven (7) working days.

Any employee who avoids, tampers with or interferes with the administration of any company drug test will be subject to discipline, including discharge.

If the employee refuses to submit to drug and alcohol testing after an alleged injury, then, according to LSA R.S. 23:1081, it may be presumed that the employee was intoxicated at the time of the injury.

Drug testing shall be performed in accordance with applicable guidelines required by law. In conjunction with testing, you will be required to disclose any medications which could affect test results.

DISCIPLINARY ACTION FOR POLICY VIOLATIONS

An employee who refuses to submit to a drug and alcohol test or other approved medical testing procedures, avoids, tampers with or interferes with the administration of a drug or alcohol test, or is found as a result of such test to have had any detectable quantity of any illegal drug, controlled substance as defined in 21 U.S.C. §812, Schedules I, II, III, IV and V, or other substance which may have an effect on the human body of being a narcotic, depressant, stimulant, hallucinogen or cannabinoid in his system, or who otherwise violates THE POLICY, will be subject to disciplinary action up to and including discharge. The Company may also impose conditions on continued employment or rehire. Compliance with THE POLICY and programs is a condition of

employment and continued employment. Law enforcement authorities may be notified of suspected criminal acts.

ACKNOWLEDGMENT

I have read and understand THE POLICY and agree to submit to all of its requirements (including drug and alcohol testing). I understand that compliance with THE POLICY is a condition of employment and continued employment with this Company. I understand that disciplinary action, up to and including termination of my employment, will be taken if I am found in violation of THE POLICY. I consent to the Company's use and disclosure of any test results or records to its management and supervisory personnel, and to its medical, legal and other consultants for the administration of THE POLICY.

Date: _____

Name of employee
(Please print)

Signature of employee

Company Representative Signature

Name of Company
(Please print)