



TANNER HEALTH
SCHOOL OF NURSING

CONSENT FOR RANDOM DRUG SCREENING

I understand that I will be subject to random drug screens, at my expense, while enrolled in the Tanner Health School of Nursing (THSON) as indicated in the Impaired Student Nurse Policy and Procedures. A positive drug and alcohol panel will result in clinical failure and subsequent withdrawal from the program.

Refusal to submit to drug and alcohol screening will result in dismissal from the Tanner Health School of Nursing program.

BY SIGNING THIS DOCUMENT, I INDICATE THAT I HAVE READ, I UNDERSTAND, AND I AGREE TO THE TANNER HEALTH SCHOOL OF NURSING IMPAIRED STUDENT NURSE POLICY AND PROCEDURES. IT ALSO CONSTITUTES CONSENT FOR THE DESIGNATED LABORATORY TO RELEASE RESULTS OF THE DRUG SCREEN TO THE APPROPRIATE ASSISTANT/ASSOCIATE DEAN AT THE THSON.

Student's Printed Name

Student's Signature

Date