

Mingo County Board of Education

Policy 5530.01 and Policy 5530.02 – Student Drug Testing

Student Consent Form: Activity Students-Driving Students-Opt-In Students-CTE/CTESWP

STATEMENT AND PURPOSE OF INTENT

School Year: 2024-2025

Participation in school sponsored interscholastic extra-curricular activities and permission to drive to school and park on campus in Mingo County Schools is a privilege. Activity Students (any student who represents Mingo County) carry a responsibility to themselves, their fellow student, their parents, and their school to set the highest possible examples of conduct, which includes avoiding the use or possession of illegal drugs. Students who elect to drive a privately owned vehicle to and from school and park on school property also carry and added accountability for the safe operation of a vehicle while on school property. CTE/CTESWP students have a responsibility to themselves, their fellow students and the workforce simulation program to make a drug free workforce a priority.

Drug use of any kind is incompatible with the physical, mental, and emotional demands placed upon participants in interscholastic extra-curricula activities and upon the positive image these students project to other students and to the community on behalf of Mingo County Schools. For the safety, health, and well-being of students who drive to school and/or participate in interscholastic extra-curricular activities, (ex. Cheerleading, FBLA, Robotics, BETA, etc....) in Mingo County Schools, the county has adopted the attached Student Drug Testing Policy 5530.01 Students participating in the programs outlined above must complete the Student Drug Testing Consent Form. For the safety, health, and well-being of student who participate in the CTE/CTESWP Programs in Mingo County Schools, the county as adopted the attached Mingo County Career Technical Education and Workplace Simulated Drug Free Policy 5530.02. Student participation in the programs outlined above must complete the Student Drug Testing Consent Form.

Participation in Extra-Curricular Activities, Driving to School, Opt-In Participants, or CTE/CTESWP

Each Activity Student, Driving Student, Opt-in participant, and/or CTE/CTESWP Program participant shall be provided with a copy of the Drug Testing Policy and “Student Drug Testing Consent Form” which shall be read, signed and dated by the student, parent or custodial guardian, and the coach/sponsor before such student shall be eligible to practice or participate in any interscholastic activities, or before issuance of a driving/parking pass.

The Opt-in Participant and parent or custodial guardian shall also read and sign a consent form.

The consent shall be to provide a urine sample:

1. As chosen by the random selection basis, and
2. At any time requested based on reasonable suspicion to be tested for illegal or performance-enhancing drugs.

No student shall be allowed to practice or participate in any activity, governed by the policy, drive to school or participate in the CTE/CTESWP Program unless the student has returned the properly signed "Student Drug Testing Consent Form."

Section to be completed by the student:

Please Print or Type School: _____ Student ID Number: _____

Students Name Last Name: _____ First: _____ MI: _____

I, the above named, student, understand after having read the Drug Testing Policy and "Student Drug Testing Consent Form" that, out of care for my safety and health, Mingo County Schools enforces the rules applying to the consumption or possession of illegal and performance-enhancing drugs. As a member of the Mingo County Schools interscholastic extra-curricular activity or one who drives and parks on school property, or an Opt-in participant, I realize that the personal decision that I make daily in regard to the consumption or possession of illegal or performance-enhancing drugs may affect my health and well-being as the possible endangerment of those around me and reflect upon any organization with which I am associated. If I choose to violate school policy regarding the use or possession of illegal or performance-enhancing drugs any time while I am involved in in-season or off-season activities, and/or driving, opt-in participant or CTE/CTESWP, I understand upon determination of that violation I will be subject to the restrictions as outlined in the Policy.

Check all that apply: School year 2024-2025

____ Driving ____ Opt-in Participant ____ Activity/Sport (list) _____
____ CTE/CTESWP

Student Signature: _____

Section to be completed by Parent/Guardian and Principal/Coach/Sponsor

We have read and understand the Mingo County Schools Student Drug Testing Policy and "Student Drug Testing Consent Form." We voluntarily agree on behalf of the student named above that , in order to participate in interscholastic extra-curricular activities, be granted permission to drive to and park on property of Mingo County Schools, by electing to have him/her included in the testing pool as an Opt-0in Participant and / or participate in the CTE/CTESWP Program the student must submit to drug testing and must also agree to be subject to the terms of the Mingo County Schools drug testing policies. We accept the method of obtaining urine samples, testing and analysis of such specimens, and all other aspects of the program. We further agree and consent to the disclosure of the sampling, testing, and results as provided in this program.

Signature of Parent or custodial Guardian: _____ Date: _____

Signature of Principal/Coach/Sponsor _____ Activity: _____ Date: _____