

SUBSTANCE ABUSE POLICY

RECEIPT OF SUBSTANCE ABUSE AND DRUG TESTING POLICY AND DRUG TESTING CONSENT FORM (Field Employees)

I have reviewed and understand the contents of the Substance abuse and Drug Testing Policy. I understand and agree to submit to urine, blood or hair specimen for testing under the circumstances and conditions outlined within this policy. Furthermore, I understand and agree that if I am involved in an accident or other unusual occurrence, which requires medical treatment, the treating physician may order testing which includes a urine, blood or hair specimen.

I hereby hold harmless all parties concerned and involved in the process of administering such drug testing and will not sue Glempiris, Inc or the parties involved for any action taken as a result of said drug testing under this policy that may prohibit me from securing a job with Glempiris, Inc or prevent my continued employment with Glempiris Inc, or with any other company or party.

I understand that as a condition of employment, Glempiris Inc and/or the parties involved with the drug testing process may be required to provide documentation regarding drug testing to clients. I release Glempiris Inc, to provide this information if required to placement.

I understand that any test results reported to Glempiris, Inc`s Medical Review Officer by the Lab that coincides with a confirmed use of a prescription drug that cannot be confirmed as a current prescription with my physician will result in either my termination or not being hired by Glempiris, INC`s.

I hereby attest that I have read and understand the Substance Abuse Policy and that I must be drug free and alcohol free in the performance of my job duties. I understand adherence to this policy is a condition of employment and continued employment with Glempiris, INC as specified in the above policy.