



# DRUG TESTING APPLICANT NOTICE AND ACKNOWLEDGMENT

BPD SOP CHAPTER III SECTION 75 ATTACHMENT A

I, \_\_\_\_\_, understand that as part of the pre-employment process, the **BERNARDSVILLE POLICE DEPARTMENT** will conduct a comprehensive background investigation to determine my suitability for the position for which I have applied.

I understand that as part of this process, I will undergo drug testing through urinalysis. I understand that a negative drug test result is a condition of employment. I understand that if I refuse to undergo the testing, I will be rejected from employment.

I understand that if I produce a positive test result for illegal drug use, I will be rejected for employment.

I understand that if I produce a positive test result for illegal drug use or refuse to take the test, that information will be forwarded to the Central Drug Registry maintained by the Division of State Police. Information from that registry can be made available by court order or as part of a confidential investigation relating to employment with a criminal justice agency.

I understand that if I produce a positive test result for illegal drug use and am not currently employed as a sworn law enforcement officer, I will be barred from future law enforcement employment in New Jersey for two years from the date of the test. After this two year period, the positive test result may be considered in evaluating my fitness for future criminal justice employment.

I understand that if I am currently employed as a sworn law enforcement officer and I produce a positive test result for illegal drug use, my current law enforcement employer will be notified of the positive test result. In addition, I will be dismissed from my law enforcement position and I will be permanently barred from law enforcement employment.

I have read and understand the information contained on this "Applicant Notice and Acknowledgment" form. I agree to undergo drug testing through urinalysis as part of the pre- employment process.

\_\_\_\_\_  
Signature of Applicant                      Date

\_\_\_\_\_  
Signature of Witness                      Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name