

2009-2010 LISD RANDOM STUDENT DRUG TESTING CONSENT FORM

Campus/Grade _____ Date of birth: _____ Student I.D. #: _____

PRINT STUDENT LEGAL NAME: _____
LAST NAME FIRST NAME

AS A STUDENT:

• I understand and agree that participation in extracurricular activities is voluntary and a privilege. I also understand that having a parking permit is voluntary and a privilege. I understand that as part of my voluntary participation in extracurricular activities and/or having a parking permit, I am also consenting to participation in the school district's Random Student Drug Testing Program. Activities that are included can be accessed on the LISD website (www.lisd.net/choices) under Safe and Drug Free Programs and are also available at the front desk at each secondary campus as well as listed on the back of this form. Activities may be added or deleted at the discretion of the LISD School Board and Superintendent.

• I understand that if I decline to consent to participation in the Random Student Drug Testing Program that I will be unable to participate in the selected competitive extracurricular activities and/or have a parking permit in the Lewisville Independent School District, for the entire academic school year.

AS A PARENT/ GUARDIAN / CUSTODIAN:

• I have read policy FNF (LOCAL) and understand that my child's participation in Extra-curricular activities is voluntary and a privilege. I also understand that having a parking permit is voluntary and a privilege. I understand that as part of my child's voluntary participation in extracurricular activities or desire to have a parking permit, I am consenting to his/her participation in the school district's Random Student Drug Testing Program for the entire academic school year.

• I understand that if I decline to consent to my child's participation in the Random Student Drug Testing Program, my child will be unable to participate in competitive extracurricular activities or have a parking permit in the Lewisville Independent School District.

As evidenced by my signature below, I hereby consent to allow the student named above to undergo random drug testing for the presence of illicit drugs and/or banned substances in accordance with applicable Board policy. I understand that the urine collection process will be overseen by a qualified vendor and that samples will be sent to a certified medical laboratory for testing, and that samples will be coded for confidentiality. I hereby consent, the vendor selected by the Lewisville Independent School District, its laboratory, doctors, employees, and/or agents to perform urinalysis testing for the detection of illicit drugs and/or banned substances.

I further understand and consent to the vendor selected by Lewisville Independent School District, its doctors, employees, and/or agents, to release results of tests to the Lewisville Independent School District in accordance with Board policy. I understand that the consent granted herein is effective for all activities in which the above-named student might participate during the 2009- 2010 school year. This consent is effective for the entire school year.

Printed Parent/ Guardian/ Custodian Name _____ Daytime Phone Number _____

Parent/ Guardian/ Custodian Signature _____

Date _____

Parent Presentation
attended or viewed on-line.

Student Signature _____

Date _____

Student Presentation
attended or viewed on-line.

REQUIRED – Academic year 2009-2010

You *MUST* Check All Activities That You Will Participate or Plan To Participate In during this school year.

You must return the completed form to your respective coach or sponsor or Assistant Principal before you can participate and/or compete.

<input type="checkbox"/> Academic Decathlon	<input type="checkbox"/> Softball
<input type="checkbox"/> Academic Octathlon	<input type="checkbox"/> Student Council
<input type="checkbox"/> Athletic Trainers	<input type="checkbox"/> Swimming
<input type="checkbox"/> Band	<input type="checkbox"/> Technology Student Association
<input type="checkbox"/> Baseball	<input type="checkbox"/> Tennis
<input type="checkbox"/> Basketball	<input type="checkbox"/> Theatre Arts
<input type="checkbox"/> Business Professionals of America (BPA)	<input type="checkbox"/> Track
<input type="checkbox"/> Cheerleading	<input type="checkbox"/> UIL - Academic Team
<input type="checkbox"/> Choir	<input type="checkbox"/> UIL- Accounting
<input type="checkbox"/> Color Guard	<input type="checkbox"/> UIL- Editorial
<input type="checkbox"/> Cross Country	<input type="checkbox"/> UIL- Feature
<input type="checkbox"/> Debate	<input type="checkbox"/> UIL- Headline
<input type="checkbox"/> DECA Club	<input type="checkbox"/> UIL- Journalism
<input type="checkbox"/> Diving	<input type="checkbox"/> UIL- Literary Criticism
<input type="checkbox"/> Drill Team	<input type="checkbox"/> UIL- Math Club
<input type="checkbox"/> Drumline	<input type="checkbox"/> UIL- News
<input type="checkbox"/> Football	<input type="checkbox"/> UIL- One Act Play
<input type="checkbox"/> Future Business Leaders of America (FBLA)	<input type="checkbox"/> UIL- Ready Writing
<input type="checkbox"/> Future Farmers of America (FFA)	<input type="checkbox"/> UIL- Science Club
<input type="checkbox"/> Golf	<input type="checkbox"/> UIL -Social Studies Club
<input type="checkbox"/> Junior State America	<input type="checkbox"/> UIL - Speech
<input type="checkbox"/> Orchestra	<input type="checkbox"/> UIL -Spelling/ Vocabulary
<input type="checkbox"/> Power lifting	<input type="checkbox"/> UIL – Theater Tech
<input type="checkbox"/> Robotics	<input type="checkbox"/> VASE- Visual arts Scholastic Event
<input type="checkbox"/> ROTC	<input type="checkbox"/> Volleyball
<input type="checkbox"/> Soccer	<input type="checkbox"/> Winterguard
	<input type="checkbox"/> Wrestling
	<hr/>
	<input type="checkbox"/> Parking Permit
	<input type="checkbox"/> Voluntary