

**Employee Acknowledgment Form
Alcohol and Drug-Free Workplace**

Archuleta School District 50 JT

I, THE UNDERSIGNED EMPLOYEE OF ARCHULETA SCHOOL DISTRICT 50 JT, have received a copy of the Alcohol and Drug-Free Workplace policy and:

1. I agree to abide by the terms of the policy.
2. I agree to notify my supervisor if I am convicted of violating a criminal drug statute in the workplace no later than five days after the date of such conviction.

Employee name (printed)

Employee signature

Date

Adopted: May 28, 2013
Reviewed: April 13, 2021