



## CONSENT AND RELEASE FOR BACKGROUND SCREENING

I, understand that according to the policy of the Company, I am required to undergo a background screening. I hereby consent to having a background screening done by the Company. I understand that the Company may utilize an outside firm or firms to assist in checking such information and I specifically authorize such an investigation by information services and outside entities of the Company's choice. I further authorize the background screening results to be disclosed to the Company.

I consent to having the background screening and do not bear any liability for risks associated with the background screening and further agree to hold the company, its agents, directors, officers, associates and background screening agencies harmless from any all liability in connection with this background. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further.

## CONSENT AND RELEASE FOR DRUG/ALCHOL SCREENING

I, herby agree, upon a request made by Personnel People (the Company), to submit to a drug or alcohol test and to furnish a sample of my urine, breath, and/or blood analysis. I hereby consent to having either a breath, urine and/or blood sample obtained and tested by a physician, nurse or technician at a laboratory/medical facility designated by the Company. I further authorize the physician, nurse or technician, or his/her agents participating in this drug/alcohol screen test to disclose results of the test to the Company. I authorize the Company to disclose any documentation relating to such test to any governmental entity involved in a legal proceeding or investigation connected with the test.

I am unaware of any medical condition which would indicate that withdrawing blood and/or urine might endanger my physical health. I understand that a documented chain of custody receipt form, including the specimen identity and integrity, exists throughout the collection and testing process.

I will hold harmless the Company and any laboratory/medical facility designated by the Company, meaning that I will not sue or hold responsible such parties for any alleged harm to me that might result from such testing, including loss of employment or any other kind of adverse job action that might arise as a result of the drug or alcohol test, even if a Company or laboratory representative makes an error in the administration or analysis of the test or the reporting of the results. I will further hold harmless the Company and any testing laboratory/medical facility designated by the Company for any alleged harm to me that might result from the release or use of information or documentation relating to the drug or alcohol test.

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Signature of Applicant

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Date