IRON WORKERS LOCAL 290 APPRENTICE PROGRAM

DRUG AGREEMENT

I, _______________________________________, understand that as a condition to consideration or acceptance into the Iron Workers Local 290 Apprenticeship Program, I will agree to be drug tested as a requirement for continuation in the Apprenticeship Program.

I understand and accept that my failure to submit to drug testing when called upon by the Joint Apprenticeship Committee or produce a positive result within my 1st year will result in my dismissal from the Apprenticeship Program.

_________________________________________
Applicant’s Signature

_________________________________________
Witnessed By

_________________________________________
Date