

STATE OF MARYLAND
SUBSTANCE ABUSE POLICY
(AS REVISED ON APRIL 1, 1991)

ACKNOWLEDGEMENT OF RECEIPT

As an employee of the State of Maryland, I hereby certify that I have received a copy of the State's new policy regarding the maintenance of a drug-free and alcohol-free workplace.

I realize: that working under the influence of a controlled dangerous substance is a violation of this policy; that working under the influence of alcohol, and driving on or off the job under the influence of alcohol is a violation of this policy; that working under the inappropriate influence of prescribed or over-the-counter drugs is a violation of this policy; and that any violation of this policy can subject me to disciplinary action up to and including termination.

As a condition of employment, I must abide by the terms of this policy and will notify my employer of any criminal drug offense or alcohol driving offense convictions no later than five (5) days after such conviction. I further realize that federal law mandates that the employer communicate this conviction to the federal agency, and I hereby waive any and all claims that may arise from conveying this information to the federal agency.

Employee's Name (Print)

Employee's Signature

Date

Supervisor's Signature

Date