



## CONTROLLED SUBSTANCE TEST RELEASE AND AUTHORIZATION

Aerotek (The "Company") maintains a drug-free work environment and may require you to submit to and pass a controlled substance test as a condition of employment and as a condition of continued employment potentially for this assignment with Aerotek, Inc. Are you willing to submit to a controlled substance test under these guidelines?

☒ Yes

☐ No

Contract Employee Initials: RHL

I, Rodney L. Larson, have received and read a copy of The Company's Drug and Alcohol Policy. I have read this policy and have had the opportunity to ask questions. I agree to follow the policy and to accept the penalties, including among others, the penalty of immediate discharge for violating the policy. I understand that my compliance with this policy is a condition of my employment and continued employment. I hereby certify that I am not a current user of illegal drugs.

I hereby give my consent to and authorize The Company, and the testing laboratory designated by The Company, to perform the appropriate tests and procedures to identify the presence of controlled substances. I also give my permission for the results of the controlled substance test to be released to The Company and to The Company's clients requesting my services.

I understand that refusal to take a controlled substance test, provide a sufficient amount of specimen, attempts to adulterate the sample, or a positive test result for controlled substances will result in The Company denying my application for employment or immediately terminating my employment.

I hereby release and hold harmless The Company, its employees, agents, contractors, clients and any persons or other parties disclosing information from any and all liability whatsoever arising from this request for a controlled substance test, from the testing of the sample, and from decisions made concerning my application for or continuation of employment based upon the results of the controlled substance test. I hereby authorize that a photocopy of this authorization may be construed as an original. I also give my permission to The Company to release the results of the controlled substance test, in defense of any claim(s) brought forth in connection with the denial of my application for employment or the termination of my employment.

I acknowledge that The Company's Drug and Alcohol Policy is subject to change at any time without notice, and nothing contained herein shall alter or limit The Company's right to terminate my employment at any time, for any reason, without prior notice.

Rodney Lester Larson  
Printed Name (First, Middle, Last)

Rodney Lester Larson  
Signature

May 10, 2013  
Date