



CARSON CITY SCHOOL DISTRICT

EMPLOYEE RESPONSE FORM

EMPLOYEE REPRESENTATION REJECTION

I have been advised of my right to representation in connection with a request that I submit to a drug and alcohol test, as set out in the negotiated collective bargaining agreement with the Carson City School District and as allowed by law (the Weingarten Act), and I have seen the evidence of reasonable suspicion giving rise to the request that I submit to such testing and I hereby knowingly and voluntarily reject my right to representation at this time.

Employee's Signature

Date

Immediate Supervisor

Date

Alcohol and Drug Testing Program Manager/Designee

Date