## DRUG SCREENING AND CRIMINAL BACKGROUND CHECK ACKNOWLEDGENT AND AGREEMENT

## UNC CHARLOTTE COLLEGE OF HEALTH AND HUMAN SERVICES EDUCATION PROGRAMS REQUIRING EXTERNAL HEALTH OR HUMAN SERVICE FACILITIES

| Stu | dent's Printed Name CHHS Program   |  |
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| 1.  | I understand and acknowledge that the UNC Charlotte College of Health and Human Services (CHHS) has affiliated with several health care and human services facilities (hereinafter "Facilities") to provide internships, field placements or clinical experiences for students in the CHHS (hereinafter "Students"). I further understand and acknowledge that the Facilities have a compelling interest in the integrity of their services and the health and safety of their patients, others who may come into contact with Students, and the Students themselves.  |  |
| 2.  | I understand and acknowledge that in order to protect their interests, many Facilities require Students to comply with their drug testing and/or criminal background check policies and to undergo drug testing and/or criminal background checks as conditions of participating in their education programs. In addition, such Facilities often require that Students submit to the required drug testing and/or criminal background checks at the Students own expense. I understand that the CHHS will provide Students with information to obtain the drug testing and/or criminal background checks required by the Facilities.                           |  |
| 3.  | I understand and acknowledge that a Facility may, in accordance with its policies, reject or expel a Student from its Facility based on the results of the drug testing and/or criminal background checks.   |  |
| 4.  | ${\rm I}$ am or will be enrolled as a Student in the CHHS, and ${\rm I}$ plan to participate as a Student in an educational experience at a Facility.  |  |
| 5.  | Because participation in facility-related educational programs is a degree requirement for Students in the CHHS program indicated above, I understand that I may be required to undergo a criminal background check and/or drug screening as a condition of my participation in an internship, field placement or clinical experience at an external health and human service facility.  |  |
| 6.  | As a condition of participating as a Student in an education program, I hereby agree to comply with the criminal background check requirements at each Facility to which I am assigned. If the Facility facilitates criminal background checks, I agree to comply with such requirements and follow the procedures set forth by the Facility. If the Facility requires that I undergo a criminal background check prior to my placement, I agree to undergo a criminal background check by a CHHS-approved agency at my own expense. I further agree that, if required by the Facility, CHHS may share my criminal background check results with the Facility. |  |
| 7.  | I hereby agree to comply with the drug screening test requirements at each Facility to which I am assigned. If the Facility facilitates drug screening, I agree to comply with such requirements and follow the procedures set forth by the Facility. If the Facility requires that I undergo drug screening prior to my placement, I agree to undergo drug testing by a CHHS-approved testing laboratory at my own expense. I further agree that, if required by the Facility, CHHS may share my drug test results with the Facility.   |  |
| 8.  | I have read both the CHHS Criminal Background Check and Drug Screening Policy and this Acknowledgement and Agreement, and I understand its contents. I have had the opportunity to ask questions of and discuss the Policy and this Acknowledgement and Agreement with appropriate administrators in the College of Health and Human Services. I understand that I am responsible for meeting the requirements set forth in the Policy and this Acknowledgment and Agreement.  |  |
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| Stu | Student's Signature Date   |  |

Effective Date: 8/10/05 Revised: 8/09, 3/1/15