

EXHIBIT 1
PRE-EMPLOYMENT DRUG SCREENING POLICY
for the City of John Day

This is the City of John Day located in Grant County, Oregon (hereinafter referred to as “City”) Pre-Employment Drug Screening Policy that became effective on November 22, 2005.

1. OBJECTIVES:

The City has adopted this policy because it is committed to establishing a safe working environment for its employees and providing high standards of employee performance, productivity and reliability.

2. APPLICATION:

All applicants who are offered employment after said effective date of pre-employment drug screening policy are required to submit to a drug screening test. An applicant’s failure of a drug screening test will disqualify the applicant from employment with the City. A verified positive result on a drug test is considered to be failure of the drug test. Applicants will be informed in writing if they are rejected on the basis of a confirmed positive drug test result. In the event you are not prepared to consent to a pre-employment drug screening test as a condition of employment by signing below, your employment application will be rejected. Any applicant who submits to a pre-employment screening test and engages in conduct that obstructs the testing procedure or otherwise refuses to cooperate with the testing procedures is ineligible for employment with the City.

This policy is not intended to create a contract of employment or to contain the terms of any contract of employment. The City retains the sole right to change, amend or modify any term or provision of this policy.

3. TESTING PROCEDURE: To be eligible for employment with the City, the applicant must submit to the following pre-employment drug screening test procedures:

3.1 You will be directed to the nearest collection facility. You must make an appointment and submit to a test within the time period designated by the City Manager.

3.2 You should arrive at the collection facility approximately 5 to 10 minutes prior to your scheduled appointment in order to complete the necessary paperwork. You must also bring a current driver’s license or other photograph identification.

3.3 You must sign the consent form presented to you which permits the collection facility to collect a sample and conduct the drug screening test. In the event you refuse to sign the consent form or otherwise refuse to proceed with the drug screening test, you will be ineligible for employment with the City.

3.4 You must also sign the authorization form presented to you which permits the collecting facility to disclose the laboratory results of your drug screening test to the City Manager. In the event you refuse to sign the authorization form, you will be ineligible for employment.

3.5 You must provide a urine sample to the collection facility in the manner requested by the collection facility. The collection is done in a controlled environment by trained medical personnel. Drug screening tests will be conducted using laboratory testing of urine specimens for the following drugs: marijuana, cocaine, opiates, phencyclidine (PCP), amphetamines and substances specified in Schedules I through V of Section 202 of the Controlled Substances Act, 21 USC 811, 812 and as defined in 21 CFR 1200.11 through 1300.15 unless authorized by legal prescription or are exempt from federal or state law.

3.6 If you test positive for any of the named drugs, submit a sample that has been diluted, altered, etc. or otherwise refuse to cooperate with the testing procedure, you will be ineligible for employment.

3.7 In the event your pre-employment drug screening test is positive for a legally obtainable drug, you may be required to submit documentation verifying your lawful use of the drug. In the event you refuse to submit requested verification, you will be ineligible for employment.

4. REJECTION UNFAIR OR BASED ON INACCURATE TEST RESULT: If you feel your rejection for employment was unfair or based on an inaccurate test result, you may submit a written objection to the City Manager at 450 East Main Street, John Day, OR 97845 within ten (10) days of the date you are informed of your ineligibility for employment. The objection must contain information explaining why you feel your rejection from employment was unfair or based on an inaccurate test result.

5. APPLICANT’S ACKNOWLEDGMENT RECEIVED COPY AND ACCEPTANCE:

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THE PRE-EMPLOYMENT DRUG SCREENING POLICY AND THAT I HAVE CAREFULLY READ, UNDERSTAND AND ACCEPT THE TERMS OF THE PRE-EMPLOYMENT DRUG SCREENING POLICY.

Dated this ____ day of _____, 20__.

Applicant’s Printed Name

Applicant’s Signature