

Alcohol and Other Drug Screen

Contractor Declaration

Supplier	Enter your company name		
Name of Contract employee	Enter the individual workers name		
DOB of Contract employee	Enter the individual workers date of birth		
Please complete all sections of this form. Failure to do so will delay the workers WesCEF induction.			
Sample validity and collection			
<input type="checkbox"/>	Sample valid within 28 days prior to completing General Site Induction		
<input type="checkbox"/>	Sample collected by a certified collector, having been trained to HLTPAT005 Collect specimens for drugs of abuse testing and in accordance with AS3547 <i>Breath alcohol testing devices for personal use</i> and/or AS4308 <i>Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine</i>		
Alcohol test result			
<input type="checkbox"/>	Negative result Results are acceptable as per WesCEF Drug & Alcohol Procedure (Section 7)		
Urine drug test result			
<input type="checkbox"/>	Negative result, no further analysis required Results are acceptable as per the threshold levels prescribed in AS4308 <i>Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine</i>	OR	<input type="checkbox"/> For any detected substances <ul style="list-style-type: none"> confirmatory testing via GCMS analysis has been undertaken prescription has been sighted substances have been assessed to be consistent with declared medications.
Declaration of Officer on behalf of Supplier			
Name	Name of person completing declaration		<input type="checkbox"/> I acknowledge that the information declared is true and correct.
Date	Enter todays date		

WesCEF Drug & Alcohol Procedure can be located at <https://csbp.com.au/contractorssuppliers/safety-resources>