

DNRC Policy: 3-0012

Name: DRUG FREE WORKPLACE POLICY

Reference MOM: _____

Reference Other: _____

Approval:

Signature: /s/_Bud Clinch

Effective Date: 6/25/2002

Drug Free Workplace Policy

The Department of Natural Resources and Conservation (DNRC) is committed to a drug free workplace.

It is the policy of the State of Montana and the DNRC that the **unlawful** manufacture, distribution, dispensing, possession or use of dangerous drugs as defined in Section 50-32-101 MCA, by any employee in the workplace or in a work status is prohibited.

An employee who violates this policy is subject to discipline action, up to and including discharge (termination) as provided in the State Discipline Handling Policy, ARM 2.21.6505 and DNRC 3-0130.

This policy shall apply to full-time employees, part-time employees, temporary, seasonal, short term and emergency firefighter employees. This policy shall be used unless it conflicts with negotiated labor contract provisions, which shall take precedence to the extent applicable.

This policy is adopted in compliance with the Drug-Free Workplace Act of 1988 (pub.L 100-69, title v subtitle D).

Drug Free Workplace Policy

Confirmation of Receipt of Policy

In accordance with the Drug-Free Work Place Act and policy of the Department of Natural Resources and Conservation, will:

1. Abide by the terms of the Department of Natural Resources and Conservation policy requiring a drug-free work place, and
2. Notify the agency (appropriate immediate supervisor) of any conviction of a criminal drug statute which is the result of a violation which occurred in the work place. The Department of Natural Resources and Conservation must be notified no later than five (5) days after the conviction.

I understand that The Department of Natural Resources and Conservation will take the following action within thirty (30) days of receiving notice of conviction from an employee:

Take appropriate disciplinary action against the employee, up to and including discharge (termination).

I confirm that I have received a copy of the Department of Natural Resources and Conservation Drug Free Work Place Policy and this confirmation form. Your signature indicates that you have received and read: (1) a copy of the Department of Natural Resources and Conservation Drug-Free Work Place Policy and (2) a copy of this "Confirmation" of Receipt of Policy. Your signature indicates that you understand the policy and the potential ramifications for failure to abide by the policy. Please make a copy of the signed confirmation form for your files and return it to the Department within five (5) days of receipt.

Failure to sign and return this confirmation form may result in disciplinary action up to and including discharge (termination).

Headquarters address of employee: _____

Street address, city, county, state, zip code