

# MHP MANAGER LLC – EMPLOYMENT APPLICATION

## PERSONAL DATA

LAST NAME	FIRST	MIDDLE	HOME PHONE	CELL PHONE			
ADDRESS			CITY	STATE	ZIP	TIME AT CURRENT ADDRESS	EMAIL
HIGHEST LEVEL OF EDUCATION COMPLETED		NAME OF SCHOOL		OTHER EDUCATION/TRAINING			
DRIVER'S LICENSE NO.		STATE	Date of Birth	SOCIAL SECURITY NO.			

## EMPLOYMENT RECORD

POSITION	NAME AND CITY OF EMPLOYER	JOB DUTIES	FROM	TO	Reason for Leaving

## REFERENCES

SUPERVISOR	COMPANY	PHONE
SUPERVISOR	COMPANY	PHONE

## MANDATORY DISCLOSURES

Have you ever been convicted of a crime (misdemeanor or felony, including major traffic offenses)? \_\_\_\_\_. If yes, attach an explanation with the date, location, and disposition of case for each offense.

The company is required by law to comply with any court-ordered information requests and wage garnishment orders.

### DRUG SCREENING, BACKGROUND & REFERENCE CHECKS

I, \_\_\_\_\_, authorize the employer to investigate my references, work record and other matters related to my suitability for employment, including my motor vehicle driving record. I authorize all prior employers and references listed to disclose any information related to my work records without giving me prior notice. I release the Company, my former employers and all other persons and entities from any and all claims or liabilities in any way related to such investigation or disclosure.

I agree to submit to pre-employment drug screening and a criminal background check. Background checks will be conducted upon my authorization if I am extended a conditional offer of employment. I understand that the foregoing are conditions of employment for all applicants. The employer will use information from such investigations to make employment decisions. I acknowledge that I have the right to know the full scope and nature of any such investigations. I consent to collection of biological samples from my person, and authorize the release of those samples to a testing lab designated by the employer. Any applicant who refuses to consent to the above procedures or receives a positive drug test result will not be hired.

This application will be active for a period of 90 days. After that time, if I wish to be considered for employment, I must submit a new application. I certify that all the statements in this completed application are true and understand that any falsification or willful omission, regardless of when discovered, shall be sufficient cause for immediate dismissal or refusal to hire.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

## **Drug-Free Workplace**

The Company believes in providing a safe and productive work environment for all employees. The Company must also consider the safety of customers and vendors, its professional reputation, and compliance with applicable laws. Every employee should be equally dedicated to protection of those interests. To that end, the Company has established the following Drug-Free Workplace policy. Employees are responsible for knowing the current Drug-Free Workplace policy at all times. Should an employee have any questions regarding this policy, they should contact the Home Office for clarification.

The Company prohibits the use, possession, solicitation for, or sale of any illegal drugs, alcohol, or prescription medication without a prescription while on Company premises, or while performing duties on behalf of the Company. Employee possession, use, solicitation for, or sale of legal or illegal drugs or alcohol while away from the Company premises is also prohibited if such activity or involvement adversely affects the employee's work performance, the safety of the employee or others, or puts at risk the Company's reputation.

Employees must report to work fit for duty and free of any adverse effects of drugs or alcohol. The presence of any amount of any illegal drugs, alcohol, or prescription drugs not taken in accordance with a prescription in the employee's name is prohibited ("Prohibited Substances"). If deemed necessary by the Home Office, an employee reasonably believed to be under the influence of a Prohibited Substance while at work or performing work duties may be asked to punch out and leave work for the day, to submit to a drug test, and/or report to the police to avoid an unsafe situation.

The Company does not prohibit lawful use and possession of prescribed medications. Employees must, however, consult their doctors about a medication's effect on their fitness for duty and ability to work safely, and promptly disclose any work restrictions to their supervisor. Employees need not disclose underlying medical conditions that do not affect the safe performance of their duties.

The Company may inspect any of its premises for drugs, alcohol or other contraband. Any employees, contract employees and visitors may be asked to cooperate in inspections of their persons, work areas or property that might conceal drugs, alcohol or other contraband. Employees who possess such contraband or refuse to cooperate in reasonable inspections will be subject to discipline up to and including termination. Any employee convicted of a drug violation occurring on or off Company premises must report this to the Home Office within five (5) days of the conviction. Failure to do so will result in immediate termination.

The Company may sponsor functions during or after working hours or off Company premises where alcoholic beverages will be served. On these occasions, the Company expects its employees to practice moderation, as well as to make safe and responsible decisions regarding transportation. An employee exhibiting drunk, disorderly and/or irresponsible conduct will be subject to disciplinary action up to and including termination of employment.

## Drug Testing

All applicants for employment with the Company, including temporary (1099) positions, will be subject to a pre-employment drug screening. Any offer of employment is contingent on the successful completion of a drug test conducted in accordance with the Company policy and state law. Candidates for employment who refuse to consent to a drug test or who test positive will not be hired. For applicants applying to work in Oklahoma ONLY: drug screening will occur only once the applicant has received a conditional offer for employment, if such offer is extended.

In order to maintain a safe and productive work environment, the Company requires all employees to submit to drug testing. All new employees of the Company must sign and return the Consent and Release Agreement included at the end of this Handbook. Refusal to sign the Agreement, or to cooperate with any testing, will result in termination of employment. All employees will be subject to random testing. Employees will also be tested within 12 hours of causing or contributing to an accident at work or in the performance of their duties that results in: a) injury to themselves, a fellow employee, and/or a customer or other person that requires off-site medical attention; and/or, b) seriously damage to a Company vehicle, machinery, or other property. As mentioned above, the Company may also require employees to submit to drug tests in the event of apparent workplace use, possession or influence of Prohibited Substances.

All drug testing will be administered by an independent, licensed laboratory service (the "Lab") designated by the Company. The Lab will be responsible for the random selection of employees for testing, as well as completing all tests and necessary follow-up. The taking of biological samples necessary for testing will occur on Company premises and under the supervision of the employee/applicant's immediate supervisor, or other person certified by the Lab and authorized by the Company to supervise sampling.

Once a sample is sent to the Lab, the contents will be subjected to an initial screening. If the initial screening yields a positive result, a confirmation screening will be conducted. If the confirmation screening also yields a positive result, a licensed Medical Review Officer (the "MRO") from the Lab will contact the employee to discuss their results before returning a final positive or negative result to the Company. Keep in mind that if a prescribed medication triggers a positive result, a negative result will still be returned to the Company if that medication was being taken as directed pursuant to a lawful prescription issued in the employee's or applicant's name. A positive result will **ONLY** be returned to the Company if the test yields a positive result AND the employee is unable to show evidence to the MRO that the drug which caused the positive result was taken as directed pursuant to a lawful prescription issued in the employee's or applicant's name. If the MRO returns a positive result, the employee or applicant will receive a pre-adverse action letter from the Company containing a copy of the test results. The applicant or employee will have the right to order a re-testing of the sample. Any demand for additional testing will be handled between the employee/applicant and Lab exclusively. The Company will issue an adverse action letter 5 days after issuance of the pre-adverse action letter informing the employee/applicant of what, if any, adverse employment action the Company will take based on the results of the test.

The Company will receive a final negative or positive result from the MRO for each test. Positive results will indicate the substance detected and whether the employee/applicant plans to have the sample re-tested. Any positive result received from the MRO will be considered conclusive, and the Company will make their employment decision regardless of the status of any re-testing requested by the employee or applicant.

The testing performed by the Lab on samples collected from employees and applicants will detect the presence of any of the following substances (“Screened Drugs”):

- a) Amphetamine (slang names – Speed, fast, uppers)
  - Prescription Amphetamine (used to treat ADHD, Adderall)
  - MDMA (Ecstasy)
- b) Methamphetamine (including Crystal Meth)
- c) Barbiturates (used to treat anxiety, insomnia, seizure disorders)
- d) Benzodiazepines (used to treat panic disorder, insomnia, anxiety)
- e) Marijuana
- f) Cocaine
- g) Methadone (used to treat severe pain, also used to treat addiction)
- h) Opiates (also used to treat pain), including, but not limited to: heroine, codeine; morphine; hydrocodone; hydromorphone; oxycodone,; and oxymorphone
- i) Phencyclidine (PCP)

A conditional offer of employment will be rescinded if an applicant receives a positive test result for any of the Screened Drugs.

An employee will be subject to immediate termination if a positive test result is returned in any of the following circumstances:

- a) The employee is tested for any reason and the positive result is for cocaine, heroin, methamphetamines, phencyclidine (PCP), or ecstasy;
- b) The positive result is returned for any Screened Drug after employee was tested because they caused or contributed to an accident; or,
- c) The positive result is returned for any Screened Drug after employee was tested because of apparent workplace use, possession, or influence of Prohibited Substances.

In the event an employee that is randomly tested and receives a positive result for the presence of drugs not listed or referenced in section (a) directly above, that employee will:

- a) Be tested again within two weeks of the initial, random test results are returned to the Company;
- b) Receive a “strike” saved in their personnel file to note the positive result; and,
- c) Be subject to termination in the discretion of corporate management in the event of *any* subsequent positive test result, whether from the follow-up test, subsequent random testing, or otherwise.

Final test results will be available for the Company’s review within 7 days of sample submission. If the Company intends to make any negative employment decision based on the testing results, a Pre-Adverse Action letter will be mailed to the employee or applicant within 2 business days of receiving the test results. Note that communications between the MRO and an employee or applicant are not seen by the Company and are confidential. As with all employee records, private information will be kept confidential and used only for the purposes of making employment decisions or complying with applicable law.

## DRUG TESTING CONSENT AND RELEASE

I, \_\_\_\_\_, understand that submission to random drug testing is a condition of employment with MHP Manager LLC (the "Company"). I also understand that, in accordance with the Company's Drug Free Workplace policy, I may be asked to submit to testing in the event I am involved in a workplace accident or am reasonably suspected of illegal drug possession or impairment while performing work duties. I acknowledge that I have been provided with a copy of the Drug Free Workplace policy, and that after reading and discussing the same with my supervisor do fully understand all of its terms and conditions.

By signing this form, I hereby consent to the above-mentioned testing and to otherwise fully comply with the Company's Drug Free Workplace policy for the duration of my employment, if I am employed by the Company. I authorize the Company to send specimens collected for testing to a designated independent testing company (the "Lab"), and for the Lab to release to the results of any tests performed to the Company or to government entities if required by law.

I understand that only authorized Company officers, employees, and agents will have access to testing results; that they will maintain the confidentiality of such information; and that they will use such information only as necessary to make employment decisions, respond to inquiries from government entities as required by law, or as a defense to any civil action to which I am a party. I authorize the Company to discuss the results with the Lab officers and employees responsible for performing the tests or evaluating the results thereof.

I will hold harmless the Company and Lab for any adverse action or claim for damages or harm to me that may result from such testing, including but not limited to loss of employment. I will further hold harmless the Company and Lab for any adverse action or claim for damages or harm to me resulting from the release or use of information or documentation relating to the drug or alcohol test, as long as the release or use of the information is within the scope of the Drug Free Workplace policy and this Agreement.

I understand that the Lab may request proof that I am taking a controlled substance as directed pursuant to a lawful prescription issued in my name. If requested, I will provide such proof within 48 hours.

I understand that if I am injured during the course of my employment and I test positive for the presence of alcohol or drugs, I may forfeit my eligibility for medical and indemnity benefits.

**I UNDERSTAND THAT, SHOULD MY TESTING RESULTS IN ANY CASE BE CONFIRMED POSITIVE OR I REFUSE TO TEST, I WILL BE SUBJECT TO DISCIPLINARY ACTION IN ACCORDANCE WITH THE DRUG FREE WORKPLACE POLICY, UP TO AND INCLUDING IMMEDIATE TERMINATION OF EMPLOYMENT. I UNDERSTAND THAT A TAMPERED WITH OR AN ADULTERATED SPECIMEN WILL BE CONSIDERED A REFUSAL TO TEST.**

**BY SIGNING BELOW, I CONSENT AND AGREE TO THESE TERMS.**

Employee/Applicant Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent/Guardian Signature if Employee is a Minor)

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

**TO BE PLACED IN EMPLOYEE'S PERSONNEL FILE**

**FOR NORTH CAROLINA APPLICANTS ONLY**

**MHP MANAGER LLC**

**N.C. CONTROLLED SUBSTANCE EXAMINATION REGULATION ACT**

**INITIAL NOTICE TO APPLICANTS**

In accordance with our company policy, you have been selected for a pre-employment controlled substance test. In accordance with 13 NCAC 20.0401, this Notice explains your rights and responsibilities under the N.C. Controlled Substance Examination Regulation Act (“CSERA”) (Chapter 95, Article 20 of the N.C. General Statutes) and the corresponding administrative rules (Title 13, Chapter 20 of the N.C. Administrative Code).

- You may refuse this test; however, your job or employment opportunity may be in jeopardy.
- Although applicants may be screened by means of a “Quick Test,” any positive results must be confirmed by an approved lab using gas chromatography with mass spectrometry (GS/MS) or equivalent scientifically accepted method before hiring decisions are made.
- Current employees cannot be screened by means of a “Quick Test.”
- An approved laboratory must perform testing of samples.
- You can request a “re-test” of any positive sample. Retests must be of the same sample and must be paid for by the employee.
- You can file a complaint with the N.C. Department of Labor – Wage and Hour Bureau at (919) 807-2796 or 1-800-NC-LABOR if you believe procedural requirements of the CSERA were violated. The Department has no jurisdiction regarding an employer’s requirement for controlled substance testing or its decisions regarding results of controlled substance testing.

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Applicant

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Date

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Employer Representative

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Title

**Disclaimer:** The foregoing information is presented solely for the convenience of the reader and is not intended to replace any official source. Under no circumstances shall the Department of Labor be liable for any actions taken or omissions made from reliance on any of the information contained herein.

**TO BE PLACED IN EMPLOYEE’S PERSONNEL FILE**

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