

## SITE BASED DRUG SCREENING AUTHORISATION FORM

Site based drug screening requires authorisation from the General Manager or their delegate prior to the site entry forms being submitted to Site Administration personnel.

It is the responsibility of the Site Contact to seek this approval and forward completed document to Administration, along with the completed site entry documents.

It is the responsibility of the Site Administration personnel to update the Compliance in INX, scan the form to link to the compliance and hand the form to the Medic.

APPLICATION FOR AUTHORISATION	
Name:	
Site Contact Name:	
Workgroup:	
Date of person's arrival to site: ___ / ___ / ___	Planned date of screen: ___ / ___ / ___
Approximate time of screen to be conducted:	
<b>Photo identification must be provided by the person being tested</b>	
JUSTIFICATION FOR ONSITE SCREEN	
<input type="checkbox"/> <72hrs notice to come to site	
<input type="checkbox"/> Other – Specify below (Note: this does not mean the authorisation will be approved)	
APPROVALS	
General Manager or Delegate	
Name:	
Signature:	
Date:	
<input type="checkbox"/> Worker cleared for Site Entry pending on site based drug screening	
<input type="checkbox"/> Worker NOT cleared for Site Entry unless drug screen results are submitted prior to arrival and are in accordance with the Fitness for Work Policy	
<input type="checkbox"/> Worker NOT cleared for Site Entry	
<b>Site Contact to return this form to Administration accompanied with completed site entry documentation</b>	

Prepared by:	Gemma Willison	Document Status:	Uncontrolled
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