

REGULATION

—WASHINGTON TOWNSHIP SCHOOL DISTRICT

STUDENTS

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Student-Athlete and Student Parking Permit
Holder Drug Testing

R 5530.1 STUDENT ATHLETE AND STUDENT PARKING PERMIT HOLDER DRUG TESTING

Procedure

1. Definitions

Drug: any substance considered a controlled dangerous substance pursuant to N.J.S.A. 2C: 35-2, including steroids and alcohol.

Student-Athlete: any student, grades 9-12, participating in freshman, junior varsity and/or varsity interscholastic athletic programs for the Washington Township Public School District, including cheerleading.

Athletic Season: the time period established by the New Jersey State Interscholastic Athletic Association for each sports season, i.e. Fall, Winter and Spring.

Parking Permit: the permit granted to eligible students by Administration that allows them to park in a designated parking spot on our high school campus.

2. Consent Form

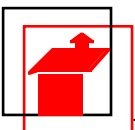
All student-athletes who wish to participate in District athletic programs shall be provided a copy of this Student-Athlete and Student Parking Permit Drug Testing Policy ("Policy") and thereafter shall be required to sign a form consenting to random testing and testing in accordance with NJSIAA requirements. The student-athlete must also provide written consent to such testing from his/her parent(s). Any student-athlete who does not have the consent form signed by his/her parents will be suspended from participation for the upcoming athletic season and will not be allowed to participate in any future interscholastic athletic program until he/she is in compliance with the Policy.

All students who wish to be eligible for student parking permits and/or are current holders of student parking permits shall be provided with a copy of this Policy and thereafter shall be required to sign a form consenting to random drug testing, and must also provide written consent to such testing from his/her parent(s). Failure to gain the written consent by his/her parents will result in ineligibility and/or revocation of a student parking permit until he/she is in compliance with the Policy.

3. Random Selection for Testing

Twenty-five percent (25%) of all student-athletes and student parking permit holders will be tested randomly during the course of the school year, Monday through Saturday.

80% of the athletes tested should be in-season with the other 20% representing out of season athletes. The testing periods for Student-Athletes will be in effect for an entire year from the first date of eligibility of their first athletic program.



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For student parking permit holders, 50% of the student parking permit holders tested should be during the first two marking periods and 50% should be during the final two marking periods of the school year. The testing periods for student parking permit holders will be in effect for an entire year from the first day of school that the student parking permit holder becomes in possession of their student parking permit.

The confidential student code numbers of the student-athletes participating in each given sport will be placed in either an in-season or out-of-season pool from which the authorized collector will draw the student code numbers for random drug testing. Those selected for testing shall be immediately notified and tested the same day.

The confidential student code numbers of student parking permit holders will be placed in one pool from which the authorized collector will draw the student code numbers for random drug testing. Those selected for testing shall be immediately notified and tested the same day.

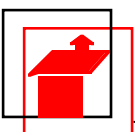
4. Collection of Urine Samples

The collection of urine samples will be administered during the school day, and/or after school/Saturday at the discretion of the principal/designee. Student-athletes and student parking permit holders will be called to the main offices under the direction of a grade level assistant principal. The grade level assistant principal will provide for a confidential escort of the student-athletes and student parking permit holders to the Office of the Assistant Principal for Athletics/Student Activities and/or the Nurse's office.

The student-athlete and/or student parking permit holder selected for testing pursuant to the foregoing random procedure shall complete a specimen control form, which bears an assigned identification number. This number shall be the sole means for identifying the specimen by all laboratory personnel. Only the Superintendent of Schools, the Athletic Director (for student-athletes only), and the High School Principal/Executive Assistant Principal shall know the assigned number for each student selected for testing.

After completing the control form, the collector shall take all precautionary steps to ensure test validity and prevent tampering (e.g.) removal of all jackets and bookbags, empty all contents from pockets, etc. The student-athlete and/or student parking permit holder shall then enter a secured lavatory unwitnessed by the collector. Those selected for testing shall produce a urine sample. The collector shall listen for normal sounds of urination and flush the toilet after collecting such a sample.

After the sample is produced, those selected shall give the sample to the collector who shall check the sample for temperature and signs of tampering, and, if satisfied with the integrity of the sample, the collector shall promptly transfer the sample to a



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specimen bottle provided by the testing laboratory that bears the assigned identification number.

5. Testing Facility

The Board of Education shall determine which testing laboratory facility is to be used to test student-athlete and student parking permit holders' urine samples. Selected facilities shall be federally approved testing facilities that demonstrate sufficient accuracy in results to the satisfaction of the Board. A split urine sample will be taken for all student-athletes and student parking permit holders. The second sample must be collected at the same time as the first sample to be sent to the District's approved testing facility. Chain of custody procedures, discussed below, must be followed by the District's chosen facility. Those tested shall have the option to send a split sample to an approved testing facility of his/her choosing, at his/her expense. Appropriate weight will be given to the results of tests run by the student-athlete/student parking permit holder's facility of choice. Additional testing may be deemed necessary by the administration.

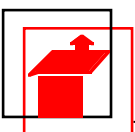
6. Test Procedure

Urinalysis will be the preferred testing method. If the student-athlete refuses to submit to any test, and or tampers with the testing procedures, such student-athlete shall forego his/her privilege of participation in the District's athletic program and will be subject to #9 "Procedures Upon Positive Test Result."

If the student parking permit holder refuses to submit to any test, and/or tampers with the testing procedures, such student parking permit holder shall forego his/her privilege of having a District issued student parking permit and will be subject to #9 "Procedures Upon Positive Test Result."

In addition, any student-athlete and/or student parking permit holder who has tampered with the testing procedures will be subject to disciplinary action, or any student who has refused to submit to a random drug test, may be subject to disciplinary action. If the student-athlete/student parking permit holder is unable to complete the urinalysis during the prescribed time when the collector is present in the building, the following procedure shall be implemented: the student-athlete/student parking permit holder will be required to produce a urinalysis at the Jefferson Washington Township Hospital Access Center prior to the close of the working day. The student-athlete/student parking permit holder's inability to provide a urine sample at the conclusion of the day will be treated as a refusal to submit to testing and will be subject to the policy outlined in #9 "Procedures Upon Positive Test Result."

7. Screening and Confirmation Procedures to be Used by the Testing Facility and Levels Determining Positive or Negative Results



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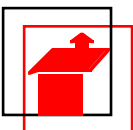
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The testing facility shall screen each urine specimen by an immunoassay method, e.g., EMIT RIA, FPI, for each illegal drug or drug group as directed by the administration. Specimens may also be analyzed for acid, neutral and basic drugs by thin layer chromatography. If either or both of the screenings are positive, gas chromatography/mass spectrometry must be used to confirm positive test results. In order for a specimen to be considered positive, either or both of the first level tests and the gas chromatography test must report positive results. A negative result of both tests on the first level or of the gas chromatography test will preclude a finding that the specimen is positive. The levels below which specimens are deemed negative are as follows:

	Initial Test Level (ng/ml)	Confirmatory Test Level (ng/ml)	Confirmatory Method
Amphetamines	1000	1000	GC/MS
D-Amphetamines	1000	1000	GC/MS
Barbiturates	200	200	GC/MS
Amobarbital	200	200	GC/MS
Butalbital	200	200	GC/MS
Pentobarbital	200	200	GC/MS
Phenobarbital	200	200	GC/MS
Secobarbital	200	200	GC/MS
Benzodiazepine	200	200	GC/MS
Metabolites			
Nor diazepam	200	200	GC/MS
Temazepam	200	200	GC/MS
Oxazepam	200	200	GC/MS
Cocaine	300	300	GC/MS
Marijuana	50	50	GC/MS
(11-delta-9-THC-9- Carboxylic acid)			
Methadone	300	300	GC/MS
Methaqualone	300	-----	GC/MS
Opiate			
Metabolites	300	300	GC/MS
Codeine	300	300	GC/MS



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	Initial Test Level (ng/ml)	Confirmatory Test Level (ng/ml)	Confirmatory Method
Morphine	300	300	GC/MS
Phencyclidine	25	25	GC/MS
Propoxyphene	300	-----	GC/MS
Alcohol	50mg/dl	50mg/dl	-----

Targeted Anabolic Steroid Profile

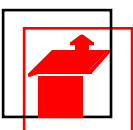
	Cutoff Units	Confirmation Compound	Cutoff Units
Boldenone	10 ng/ml	Boldenone	
Methandienone	10 ng/ml	Metabolite	1 ng/ml
Methyltestoster	10 ng/ml	Methandienone	1 ng/ml
Nadrolone	10 ng/ml	Methyltestoster	1 ng/ml
		19-Norandroster	10 ng/ml
		19-Noretlochol	10 ng/ml
		19-Noreplandros	10 ng/ml
Oxandroione	10 ng/ml	Oxandrolone	1 ng/ml
Oxymetholone	10 ng/ml	Oxymetholone	1 ng/ml
Stanozolol	10 ng/ml	Stanozolol	1 ng/ml
Probenecid	10 ng/ml	Probenecid	1 ng/ml
Clenbuterol	10 ng/ml	Clenbuterol	1 ng/ml
T/E Ratio	6	T/E Ratio	6

Please Note: If any illegal drug not listed is detected, the cut-off levels commonly used for that drug by accredited testing facilities shall be used.

The testing facility will promptly forward the test results to the Superintendent or his/her designee in a confidential manner.

8. Chain of Custody

The adult monitor at the collection site, in the presence of the student-athlete/student parking permit holder, shall cap and seal the sample with evidence tape and attach the label to the specimen bottle. The monitor shall fill in the required information on a chain of custody form, and enter the date and time that the specimen was taken and



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sealed. The chain of custody form, a copy of the release form and the specimen shall be sent to the testing laboratory. The testing facility shall record the temperature, specific gravity and creatinine level on the label for the sample, and sign the label.

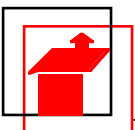
Upon arrival at the testing laboratory, personnel from that laboratory shall mark on the chain of custody form, the date and time that the laboratory received the specimen. While the specimen is at the laboratory, any technician or laboratory personnel who opens the bottle or otherwise handles the specimen shall mark his/her name, the date, time and the purpose for which the specimen was handled, on the chain of custody form. The testing laboratory shall ensure that the specimen is shipped or couriered to the facility as quickly as possible. If a test result is positive, the specimen shall be re-secured with evidence tape, signed, and dated by the testing personnel. When the testing procedure is complete, testing reports will be prepared and signed by the testing personnel. The Medical Review Officer must review the form listing medications the student-athlete/student parking permit holder is taking and note whether such medicine could cause a positive test result. If at any time during the process, inadequacies in the chain of custody occur, such inadequacies shall be reported to the appropriate laboratory authority who shall in turn notify the District. The testing facility shall retain the specimen in a locked freezer until they receive further direction from the District regarding the disposition of the sample.

If, after consulting with appropriate medical authorities, the District determines that the inadequacies in the chain of custody will affect the results of the test, the District shall direct the testing facility to dispose of that specimen. The district shall then collect another specimen and follow the procedures in this policy.

9. Procedures Upon Positive Test Result or Refusal to Test

If a sample tests negative, no further action shall be taken by the District. Refusal to provide a sample once selected will be considered a positive result and will be subject to the following procedures. If the sample tested produces a positive result, and the student-athlete/student parking permit holder is taking prescription medications, he/she shall identify such medications by providing a copy of the prescription or a physician's authorization. The student-athlete/student parking permit holder shall not be required to disclose the medical condition requiring such medication. Upon a positive test result, the student-athlete/student parking permit holder's parent(s) shall be notified immediately and the Superintendent or designee shall promptly thereafter convene a meeting with the student-athlete/student parking permit holder, his/her and parent(s).

In the case of a positive test result, consequences for the in-season athlete and the out-of-season athlete will vary as outlined below; however, an offense for an in-season athlete shall be considered an offense for an out-of-season athlete and vice versa for the purposes of the accumulation of offenses.



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The progression of offenses shall span a student-athlete's entire high school career.

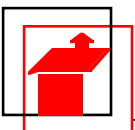
In-Season Athletes

- First Offense: Student-athlete forfeits the remainder of that sports season and may not engage in a subsequent sports season until the athlete completes an in-house drug education program and gives two consecutive clean urine samples before regaining eligibility.
- Second Offense: Student-athlete will be ineligible to participate in sports for one calendar year from the date of the second offense. In addition, the student- athlete will be required to undergo a formal drug and alcohol abuse assessment at the athlete's expense and provide documentation that such an assessment was completed. Furthermore, the student-athlete will provide a copy of the results of that assessment to one of the high school SACs and complete any course of therapy recommended by the assessment at their own expense. The course of therapy will have to be completed within the one year suspension from athletics in order for that student to be eligible to play sports. Lastly, the student- athlete will be required to give two consecutive clean urine samples before regaining eligibility.
- Third Offense: Student-athlete will be ineligible to participate in sports for the remainder of his/her years at WTHS.

Out of Season Athletes

- First Offense: Student-athlete may not engage in a subsequent sports season until the athlete completes an in-house drug education program and gives two clean urine samples before regaining eligibility.
- Second Offense: Student-athlete will be ineligible to participate in sports for one calendar year from the date of the second offense. In addition, the student- athlete will be required to undergo a formal drug and alcohol abuse assessment at the athlete's expense and provide documentation that such an assessment was completed. Furthermore, the student-athlete will provide a copy of the results of that assessment to one of the high school SACs and complete any course of therapy recommended by the assessment at their own expense. The course of therapy will have to be completed within the one year suspension from athletics in order for that student to be eligible to play sports. Lastly, the student- athlete will be required to give two consecutive clean urine samples before regaining eligibility.
- Third Offense: Student-athlete will be ineligible to participate in sports for the remainder of his/her years at WTHS.

Student Parking Permit Holders



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- First Offense: Student will be ineligible to park on campus for sixty (60) days from the date of the offense. The student will complete an in-house drug education program and give two consecutive clean urine samples before regaining their parking eligibility.
- Second Offense: Student will be ineligible to park on campus for one calendar year from the date of the offense. In addition, the student will be required to undergo a formal drug and alcohol abuse assessment at the student's expense and provide documentation that such an assessment was completed. Furthermore, the student will provide a copy of the results of that assessment to one of the high school SACs and complete any course of therapy recommended by the assessment at their own expense. The course of therapy will have to be completed within one calendar year of ineligibility to park on campus in order for the student to be eligible to park on campus. The student will also be required to give two consecutive clean urine samples before regaining eligibility.
- Third Offense: Student will be ineligible to park on campus for the remainder of his/her years at WTHS.

10. Notification of Testing and Testing Results

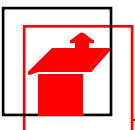
Parents of those students selected for testing will receive a phone call or message following a student-athlete/student parking permit holder's completing of the testing process. Parents will be notified if the screen is negative. If the screen is non-negative, the parents will be told that the sample is being sent for further evaluation.

Where a test result is confirmed positive, the student-athlete/student parking permit holder's parents will be contacted directly by the Medical Review Officer. The Medical Review Officer will consult with the parent to address the reasons for the positive test and a decision will be made by the Medical Review Officer regarding the legitimacy, validity or accuracy of a positive test. The Medical Review Officer will determine if that substance has been taken pursuant to a legal prescription.

Please be advised that Law enforcement will not be notified of testing results.

11. Procedures for a Student/Parent to Challenge a Positive Test Result

A student-athlete/student parking permit holder or his/her parents may request a retest of his/her specimen at his/her own expense at a laboratory approved by the District and which follows federal Substance Abuse and Mental Health Services Administration (SAMHSA) standards concerning drug testing protocols and procedures. Written requests must be received by the school administration within forty-eight (48) hours of receiving the results of the drug test. The specimen previously submitted will be forwarded to the approved lab in cooperation with the District-approved outside agency responsible for confirmatory testing.



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12. New Jersey State Interscholastic Athletic Association (NJSIAA) Regulations

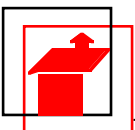
NJSIAA regulations and procedures for drug testing shall apply to all interscholastic athletes. Selection procedures, testing and sample collection procedures, lab facilities and consequences shall be in accordance with NJSIAA standards for all testing done at the request of NJSIAA. Such testing shall be conducted at NJSIAA expense. Any positive test of a student-athlete pursuant to random drug testing conducted by the New Jersey State Interscholastic Athletic Association_(NJSIAA) shall be considered an “offense” under this regulation. To the extent that the NJSIAA consequences for a positive test result are more severe than outlined in this Regulation, the NJSIAA consequences shall prevail.

13. Confidentiality

The District respects the privacy of its student-athletes and student parking permit holders and shall maintain confidentiality regarding any drug testing. All records of tests and subsequent actions shall be kept in a file, separate from the student-athlete/student parking permit holder’s regular file. The District will not release records of drug tests or any resulting action to anyone, other than the student-athlete/student parking permit holder and/or his/her parent(s), who is not directly involved with the testing without written authorization from the student-athlete/student parking permit holder and/or his/her parent(s). Results of any tests taken pursuant to this Policy shall be destroyed after one year unless otherwise requested by the student-athlete/student parking permit holder and/or his/her parent(s).

For student-athletes, please fill out Forms A, B and C. For student parking permit holders, please fill out Forms D, E and F. For those students who are both student-athletes and student parking permit holders, please fill out both sets of forms (A, B and C AND D, E and F).

Issued: 25 August 1998
Revised & Approved: 22 June 1999
Revised & Approved: 24 July 2001
Revised & Approved: 29 August 2006
Revised & Approved: 18 December 2007
Revised & Approved: 21 June 2010
Revised & Approved: 28 August 2017
Revised & Approved: 29 January 2019



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FORM A

Student-Athlete Consent to Random Drug Testing

I understand fully that my performance as a participant and the reputation of my school are dependent, in part, on my conduct as an individual. I hereby agree to accept and abide by the standards, rules, and regulations set forth by the Washington Township Board of Education, NJSIAA, and the sponsors for the activity in which I participate.

I authorize the Washington Township School District and/or NJSIAA representatives to conduct a test on a urine specimen, which I provide to test for drug use. Pursuant to the Student-Athlete and Student Parking Permit Drug Policy, I also authorize the release of information concerning the results of such a test to the Superintendent, Athletic Director, High School Principal, medical inspector and/or high school nurse; NJSIAA officials and to my parents.

I also realize that participation in the interscholastic athletic programs for the Washington Township School District is conditional upon my compliance and/or acceptance of the Student-Athlete and Student Parking Permit Drug Policy. I am also aware that Student Athletes may be tested throughout an entire year either in-season or out of season from the date of initial eligibility.

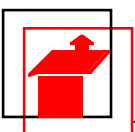
I hereby acknowledge receipt of the Student-Athlete and Student Parking Permit Drug Policy.

Date

Student Athlete

Date

Parent



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FORM B

Parent Consent to Random Drug Testing for Student Athletes

I, _____, hereby authorize the Washington Township High School District ("District") and/or the NJSIAA to conduct a random test (or tests) on a urine sample which will be provided by _____ to test for drug and/or alcohol use pursuant to the Student-Athlete Drug Policy. I also authorize the release of information concerning the results of such a test to the Superintendent, Athletic Director, High School Principal, medical inspector, and/or high school nurse and NJSIAA officials.

I have been provided a copy of the District's Student-Athlete and Student Parking Permit Drug Policy and understand its terms and agree to subject my child to the procedures described therein. I am also aware that Student-Athletes may be tested throughout an entire year either in-season or out of season from the date of initial eligibility.

My son/daughter is currently using the medication listed below, as prescribed by his/her physician. If tested positive, medical verification will be requested.

Medication:

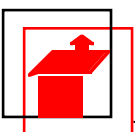
I agree to update this list as needed on Form C of R5530.1

Student Athlete

Parent

Date

Date



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FORM C

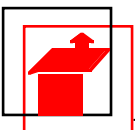
Student-Athlete Medication Update

Please complete this form and return it to the School Athletic Director. This form will be attached to the original Consent to Drug Testing contract signed by the parent and student at the beginning of the sport season. Please be sure to notify the school nurse of all medications prescribed for your son/daughter.

My son/daughter is currently using the medication listed below, as prescribed by his/her physician.

Parent Signature

Date



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FORM D

Student Parking Permit Holder Consent to Random Drug Testing

I hereby agree to accept and abide by the standards, rules, and regulations set forth by the Washington Township Board of Education.

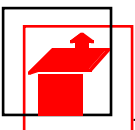
I authorize the Washington Township School District to conduct a test on a urine specimen, which I provide to test for drug use. Pursuant to the Student-Athlete and Student Parking Permit Drug Policy, I also authorize the release of information concerning the results of such a test to the Superintendent, High School Principal, medical inspector and/or high school nurse; and to my parents.

I also realize that my possession of a student parking permit, as authorized by the Washington Township School District is conditional upon my compliance and/or acceptance of the Student-Athlete and Student Parking Permit Drug Policy. I am also aware that Student Parking Permit Holders may be tested throughout an entire school year from the first school day they are in possession of a student parking permit.

I hereby acknowledge receipt of the Student-Athlete Drug and Student Parking Permit Drug Policy.

Date

Student Parking Permit Holder



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FORM E

Parent Consent to Random Drug Testing for Student Parking Permit Holders

I, _____, hereby authorize the Washington Township High School District ("District") to conduct a random test (or tests) on a urine sample which will be provided by _____ to test for drug and/or alcohol use pursuant to the Student-Athlete and Student Parking Permit Drug Policy. I also authorize the release of information concerning the results of such a test to the Superintendent, High School Principal, medical inspector, and/or high school nurse.

I have been provided a copy of the District's Student-Athlete and Student Parking Permit Drug Policy and understand its terms and agree to subject my child to the procedures described in them. I am also aware that Student Parking Permit Holders may be tested throughout an entire school year from the first school day they are in possession of a student parking permit.

My son/daughter is currently using the medication listed below, as prescribed by his/her physician. If tested positive, medical verification will be requested.

Medication:

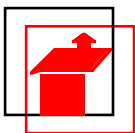
I agree to update this list as needed on Form F of R5530.1.

Student Parking Permit Holder

Parent

Date

Date



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FORM F

Student Parking Permit Holder Medication Update

Please complete this form and return it to the High School Principal. This form will be attached to the original Consent to Drug Testing contract signed by the parent and student at the beginning of the school year. Please be sure to notify the school nurse of all medications prescribed for your son/daughter.

My son/daughter is currently using the medication listed below, as prescribed by his/her physician.

Parent Signature

Date

