

CMJ, INC.

Effective: July 15, 1997
Last revised: March 28, 2006

Objective:

CMJ, Incorporated is committed to establishing a work environment where its employees are free from the effects of drugs, alcohol abuse, or other job impairing substances.

The company recognizes its obligation to its employees and those who come into contact with our facilities to provide a safe environment. Moreover, the Company is committed to promoting high standards of performance, productivity, health, safety and reliability. To those ends, the company has established this policy.

Scope:

This policy applies to all applicants and each applicant will be provided a copy. In the event that a job candidate is not prepared to consent to a pre-employment drug-screening test, the applicant will no longer be considered for employment with the company.

Policy:

The company reserves the right to test job applicants for any controlled substance as defined by law, any mood altering substance, or any substance that causes effects on the central nervous system or brain at any time, with or without cause, as the company determines appropriate.

Guidelines:

Pre-employment Drug Screening Procedures:

- Any supervisor or manager considering an individual for a position with the company is required to notify the testing facility and an appointment shall be made for the job applicant. The applicant shall be given no more than twenty-four (24) hours advance notice of testing date and time. In the event that the applicant does not appear for the scheduled appointment, he/she will forfeit their right for further consideration for employment.
- The applicant shall arrive at the testing facility approximately five to ten minutes prior to their scheduled appointment to complete the necessary paperwork. Applicants must also bring a current driver's license or other photo identification.
- The applicant will be required to sign a consent form permitting the testing facility to conduct the test, including allowing for urine collection. In the event that the applicant refuses to sign the consent form or otherwise refuses to proceed with the test, he/she shall be ineligible for employment.

Pre-Employment Drug Screen Policy

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- The testing facility will collect a urine specimen from the applicant. Trained medical personnel do the collection in a controlled environment. The results of the drug screen will be given to a designated representative of the company. The applicant's test results will be kept confidential, to the extent possible.
- Applicants who test positive will be ineligible for employment and the pre-employment process will cease. In the event that the pre-employment drug screen test is positive for a legally obtained drug, the applicant may be asked to produce written information regarding the prescription.
- Drug tests are paid for by the company, and are considered proprietary. Results, negative or positive are not released to job candidates.

Applicant's Name (printed)

Date

Signature

Testing Location: _____

Telephone Number: (____) _____

Appointment Date: _____ **Time:** _____

Any deviation from the policy and procedures set forth herein requires the approval of the Head of the Human Resources.

Approved By:

Date

EMPLOYMENT SCREENING INQUIRY FORM

APPLICANT – PLEASE PRINT

NAME (First) (Middle) (Last)

Other Name(s) Used

Present Address

City State Zip Phone

Previous Address

City State Zip Phone

Social Security # Driver's License # Job Code (interviewer use)

APPLICANT READ CAREFULLY AND SIGN: AUTHORIZATION TO RELEASE CRIMINAL HISTORY INFORMATION REPORTS, PRIVATE COMPANIES' DISHONESTY, DRUG OFFENSE, OR VIOLENCE REPORTS, OR CREDIT BUREAU REPORTS.

FOR AND IN CONSIDERATION OF MY BEING CONSIDERED FOR EMPLOYMENT, I HEREBY AUTHORIZE CMJ, INC. TO MAKE INQUIRIES TO ANY MUTUAL ASSOCIATION OR CONSUMER REPORTING AGENCY, CONCERNING MY EMPLOYMENT SUITABILITY AND QUALIFICATION: (I) ANY PUBLIC RECORD OF ANY CONVICTIONS FOR CRIMES OF VIOLENCE OR DISHONESTY; (II) ANY INCIDENTS OF EMPLOYMENT DISHONEST, RETAIL THEFT, OR OTHER EMPLOYMENT-RELATED ACTS OF DISHONESTY, VIOLENCE, OR DRUG-RELATED OFFENSES REPORTED TO ANY MUTUAL ASSOCIATION BY ANY MERCHANT OR EMPLOYER WHERE SUCH ACTS OCCURRED; OR (III) ANY CREDIT BUREAU REPORTS. I FURTHER AUTHORIZE ANY GOVERNMENTAL AGENCY WHERE SUCH CONVICTION INFORMATION IS ON FILE OR ANY COMPANY WHERE SUCH INCIDENT OR CREDIT TRANSACTION OCCURRED, AND MUTUAL ASSOCIATION TO DISSEMINATE SUCH REPORT(S) TO CMJ, INC. DURING ANY PERIOD(S) WHILE I MAY BE EMPLOYED BY CMJ, INC. I HEREBY AUTHORIZE CMJ, INC. TO MAKE FURTHER LIKE INQUIRIES TO ANY MUTUAL ASSOCIATION AS CMJ, INC. MAY, FROM TIME TO TIME DEEM NECESSARY FOR EMPLOYMENT PURPOSES. I MAY ALSO HEREBY AUTHORIZE ANY MUTUAL ASSOCIATION, ANY SUCH GOVERNMENTAL AGENCY, ANY SUCH CREDIT BUREAU, AND ANY SUCH PRIOR COMPANY TO ISSUE SUCH REPORTS IN RESPONSE TO CMJ, INC.'S INQUIRY(IES.) I WAIVE ANY FURTHER NOTICE WITH RESPECT TO CMJ, INC.'S INQUIRIES OR WITH RESPECT TO SUCH GOVERNMENTAL AGENCY'S SUCH PRIOR COMPANY'S, SUCH CREDIT BUREAU'S, OR ANY MUTUAL ASSOCIATION'S DISSEMINATION OF ANY SUCH REPORT(S). I HEREBY GENERALLY RELEASE AND FULLY DISCHARGE ANY MUTUAL ASSOCIATION, EVERY SUCH GOVERNMENTAL AGENCY, EVERY SUCH CREDIT BUREAU, AND EVERY SUCH PRIOR COMPANY FROM AND AGAINST ANY AND ALL LIABILITY WITH RESPECT TO, OR ARISING FROM THE RELEASE OR DISSEMINATION OF ANY SUCH INFORMATION FOR SUCH PURPOSES. I UNDERSTAND AND AGREE THAT MY EMPLOYMENT, PROMOTION, OR RETENTION MAY BE DETERMINED, IN WHOLE OR IN PART, BASED ON THE REPORT(S) SO ISSUED TO CMJ, INC. I HAVE BEEN INFORMED AND I UNDERSTAND THAT I MAY OBTAIN A COPY OF SUCH REPORT(S) AND THAT I MAY DISPUTE THE ACCURACY OR COMPLETENESS OF THE INFORMATION REPORTED TO CMJ, INC. BY WRITING OR CALLING THE MUTUAL ASSOCIATION PROVIDING THE INFORMATION.

SIGNATURE OF APPLICANT

DATE OF BIRTH

DATE SIGNED

EMPLOYMENT & EXPERIENCE

EMPLOYER AND LOCATION STREET ADDRESS, CITY, STATE, ZIP		POSITION TITLE AND IMMEDIATE SUPERVISOR	STARTING RATE ENDING RATE	REASON FOR LEAVING
FROM MO/YR <hr/> TO MO/YR <hr/>	EMPLOYER (present or most recent) ADDRESS	YOUR TITLE SUPERVISOR MAY WE CONTACT? TELEPHONE NUMBER	\$ \$	
FROM MO/YR <hr/> TO MO/YR <hr/>	EMPLOYER (present or most recent) ADDRESS	YOUR TITLE SUPERVISOR MAY WE CONTACT? TELEPHONE NUMBER	\$ \$	
FROM MO/YR <hr/> TO MO/YR <hr/>	EMPLOYER (present or most recent) ADDRESS	YOUR TITLE SUPERVISOR MAY WE CONTACT? TELEPHONE NUMBER	\$ \$	
FROM MO/YR <hr/> TO MO/YR <hr/>	EMPLOYER (present or most recent) ADDRESS	YOUR TITLE SUPERVISOR MAY WE CONTACT? TELEPHONE NUMBER	\$ \$	

GENERAL INFORMATION

WERE YOU REFERRED BY A CMJ, INC. EMPLOYEE?

Yes No If yes, name of employee _____

PLEASE LIST ANY FRIENDS OR RELATIVES WORKING FOR THE COMPANY

Name _____ Relationship _____

Name _____ Relationship _____

HAVE YOU PREVIOUSLY APPLIED TO CMJ, INC.?

Yes No _____

ARE THERE ANY OTHER EXPERIENCES OR SKILLS WHICH YOU FEEL WOULD QUALIFY YOU FOR WORK WITH THE COMPANY?

Yes No _____

HAVE YOU EVER BEEN DISMISSED OR FORCED TO RESIGN FROM ANY EMPLOYMENT?

Yes No If yes, please explain:

For the following question, please refer to the statements below prior to answering. IF YOU RESIDE IN:

CALIFORNIA – do not disclose (1) marijuana related convictions (felony or misdemeanor) more than two years old; (2) an offense for which you were referred to, and participated in, any pre-trial or post-trial diversion program.

CALIFORNIA, COLORADO, KENTUCKY, OHIO, MARYLAND, MASSACHUSETTS, MISSISSIPPI, VIRGINIA, WEST VIRGINIA – do not disclose criminal convictions that have since been placed under seal or expunged.

CONNECTICUT – do not disclose any offenses which are subject to erasure under Connecticut Law.

OREGON – do not disclose expunged juvenile convictions.

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR WHICH HAS NOT SINCE BEEN PLACED UNDER SEAL OR EXPUNGED? IF YES, PLEASE EXPLAIN THE NATURE OF THE CRIME(S) AND THE DATE OF THE CONVICTION(S).

STATEMENT OF APPLICANT

I Certify, that the above statements are true and that the making of false statements or omitting information will be considered sufficient cause for immediate discharge upon discovery thereof. I understand that any employment offered to me will be on a probationary trial basis. I further understand that unless specifically altered by a written employment contract, executed by an officer of the Company, my employment will be terminable at will and at any time either by myself or CMJ, Inc. I authorize CMJ, Inc. to make inquiry of any former employers or references as to my experiences, salary, or classification. I understand that I may be required to submit to a drug test in accordance with CMJ, Inc.'s Drug Testing Policy.

In addition, I specifically authorize CMJ, Inc. to make inquiries of local courts, administrative agencies, law enforcement agencies, including a criminal background check and consumer reporting agencies. I consent to a search of the Drug Enforcement Administration's Regional Office files for records of drug convictions, which will result in a national check being made by the regional office. I release CMJ, Inc. from any liability, including any potential claim for defamation, concerning the completion of my pre-employment background check.

Applicant's Signature _____ Date _____

CMJ, INC. IS AN EQUAL OPPORTUNITY EMPLOYER