

# **PEARL PUBLIC SCHOOL DISTRICT EXTRACURRICULAR DRUG AND ALCOHOL TESTING POLICY**

**\*\*This policy is intended to address only the PPSD extracurricular drug and alcohol-testing program. This policy does not address the issue of drug or alcohol possession. Possession is addressed in our district policy manual and student handbooks.\*\***

## **I. Policy**

The Pearl Public School District (PPSD) recognizes that drug and alcohol use by students participating in extracurricular activities presents special concerns about the dangerous combination of drugs or alcohol and extracurricular activities. While the misuse or abuse of alcohol, illegal drugs, prescription and even non-prescription drugs is unsafe for any student, the physical demands placed upon activity students in practice and competition makes such misuse or abuse dangerous. The activity student's use of drugs or alcohol increases the risk of activity-related injuries and impairs judgment, coordination, and reaction, leading to injuries during competition to both the student using drugs and other students or opponents. Activity conditioning can be continuous, so the concern for safety does not diminish during the off-season of an activity.

The incidence of drug use by PPSD students' grades 7 – 12 and especially activity students is not great, but even though the number of cases is small, the danger to individual students is magnified by physical exertion. Additionally, PPSD finds that, since physical conditioning, practice, and competition can often be an almost daily activity, the indication of drug use in the recent past means that (1) the activity student most probably has exercised with the drug (or alcohol) in the student's system and (2) the activity student may exercise under the influence of drugs or alcohol in the future unless there is reasonable intervention provided in this policy.

In addition to focusing on the serious health risks posed by activity student drug and alcohol use, PPSD has elected to test activity students because of their status within the school community. Activity students generally are prominent members of the student body viewed with admiration and respect. This status places activity students in leadership roles that give them the power to influence other students' behavior. Accordingly, drug and alcohol use by activity students can have a negative effect on the general health and welfare of all students.

In response to the serious health risks and other risks posed by activity student drug and alcohol use, PPSD has implemented an extracurricular drug and alcohol testing policy designed to provide early detection of drug use and to eradicate or reduce significantly the use and influence of prohibited drugs, alcohol, and other chemicals by students participating in PPSD extracurricular activities.

In pursuit of these purposes, PPSD declares that the use of prohibited drugs and alcohol, or intoxication and physical influence thereof, by activity students is inherently unsafe. Such use, intoxication or influence should be detected and prevented, and such activity students should be counseled, educated and monitored.

## **II. Authority**

This policy was adopted and is implemented by the PPSD School Board by and through the Administrative Staffs of Pearl High School (PHS) and Pearl Junior High School (PJH).

## **III. Applicability**

All students enrolled in PPSD who are 7<sup>th</sup> grade or higher and who participate or who have expressed an intention to participate in any PPSD extracurricular activity shall be subject to drug and/or alcohol testing to the extent and manner provided for in this policy.

This policy and any other PPSD drug and alcohol screening policies shall be administered separately and concurrently. Tests occurring under this policy shall not be used for or considered for the purposes of any other PPSD drug and alcohol screening policies. However, test results under this policy may be considered for the purposes of extracurricular activity eligibility and for testing or monitoring. Activity students are subject to both this policy and any other PPSD drug and alcohol screening policies.

## **IV. Definitions**

**“Activity Student”** means a member of any PHS or PJH sponsored school extracurricular organization. This definition includes any student desiring to participate in band, dance, cheerleading, chorus, ROTC, and/or athletics.

**“Alcohol” or Alcohol Beverage** means ethyl alcohol (ethanol). Reference to use of alcohol includes use of any beverage, mixture or preparation containing ethyl alcohol.

**“Coach / Activity Director”** means the school official assigned the responsibility of directing the daily operation of an extracurricular activity. This includes band, dance, chorus, ROTC, cheerleading, and all athletic teams.

**“Confirmation Test”** means a drug and alcohol test on a specimen to substantiate the results of a prior drug and alcohol test on the specimen. The confirmation test must use an alternate method of equal or greater sensitivity than that used in the previous drug and alcohol test.

**“Consent”** Any student who is enrolled in band, dance, cheerleading, chorus, ROTC and/or athletics the parent automatically gives consent for their child to be included in the Random Drug Testing Policy.

**“Continuance of Participation Waiver”** means the release waiver that must be signed by the activity student’s parent/guardian to continue participation after the activity student’s first positive result. The waiver releases the PPSD of any responsibility in the event that the activity student should have any adverse reaction(s) related to the positive test during their continuance of participation in extracurricular activities.

**“Drug and / or Alcohol Test”** means a chemical test administered for the purpose of determining the presence or absence of a drug or alcohol in a person’s system.

**“Extracurricular Activity”** means a PPSD sponsored activity in which a student chooses to participate. This includes band, dance, cheerleading, chorus, ROTC, and all athletic teams. In years subsequent to 2005-06, other extracurricular activities may be added.

**“Illegal Drug”** means a prohibited drug as set forth below, a drug listed as illegal under Mississippi law, or a drug that is illegal to use under Mississippi law without a prescription. See section V of this drug testing policy.

**“Medical Review Officer” or “MRO”** means a licensed physician, either a doctor of medicine or doctor of osteopathy, or other medical or scientific expert knowledgeable in drug abuse disorders, approved by the PPSD to interpret, evaluate, and monitor its drug-testing program.

**“Negative Drug Test”** means a drug or alcohol test that does not show evidence of alcohol or prohibited drug in an activity student’s system.

**“Performance Enhancing / Anabolic Steroids”** means any natural or synthetic substance used to increase muscle mass, strength, endurance, speed, or athletic ability. The term does not include dietary or nutritional supplements such as vitamins, minerals, and proteins that can be lawfully purchased over the counter.

**“Pool”** means all activity students that are eligible for random drug testing.

**“Positive Drug Test”** means a drug or alcohol test that indicates the presence of alcohol or a prohibited drug in an activity student’s system.

**“PHS”** means Pearl High School

**“PJH”** means Pearl Junior High School

**“PPSD”** means the Pearl Public School District

**“Prescription or Non-Prescription Medication”** means a drug prescribed for use by a duly licensed physician, dentist, or other medical practitioner licensed to issue prescriptions or a drug that is authorized pursuant to federal or state law for general distribution and use without a prescription in the treatment of human diseases, ailments, or injuries.

**“Prohibited Drug”** means any drug that is considered a part of the group of drugs listed in Section V of this drug testing policy.

**“Random Testing”** means a neutral selection basis of testing for drugs and/or alcohol which provides a mechanism for selecting activity students for testing that (1) results in an equal probability that any student from a pool of activity students subject to the selection mechanism will be selected, and (2) does not give the PPSD and school personnel the discretion to waive the selection of any activity student selected under the mechanism.

**“Reasonable Suspicion Drug or Alcohol Testing”** means drug and alcohol testing based on a belief that an activity student is using or has used drugs in violation of this policy as indicated in Section X.

**“Specimen”** means a tissue or product of the human body chemically capable of revealing the presence of drugs or alcohol in the human body.

#### **V. Prohibited Drugs/Alcohol**

The list of prohibited drugs is attached to this policy as Exhibit 1 and incorporated herein by reference. The PPSD shall designate those drugs for which tests shall be administered.

#### **VI. Implementation**

This policy was adopted by the PPSD in May 2005. All activity students and their parents/guardians will be notified of this policy upon entrance of an activity student into an extracurricular activity. The PHS and PJH Principals shall be responsible for the fair, impartial, and complete implementation of this policy and for ensuring the no-notice, surprise nature of all testing. The PPSD Athletic Director shall be responsible for the coordination and execution of all testing.

#### **VII. Consent/Refusal To Consent**

When a student is enrolled in an athletic or extracurricular activity the parent/guardian automatically gives consent for their child to be included in the random drug testing program. If a parent/guardian refuses to give consent then their child will not be allowed to participate in any athletic program or extracurricular activity.

#### **VIII. Random Drug Testing Pool Development**

Coaches/Activity Directors must present to the PPSD Athletic Director a preliminary roster of activity students for the purpose of developing the testing pool. All activity students who wish to participate in an extracurricular activity must be added to the roster.

#### **IX. Random Testing**

Activity students as defined in Section IV of this policy will be tested on a random basis for use of prohibited drugs and/or alcohol. Random tests shall be initiated without prior notice, except that the PPSD Athletic Director shall receive prior notice from the testing laboratory not more than one (1) hour prior to the commencement of collection of specimens. The random testing shall not be announced or revealed prior to the time of commencement and shall be conducted on a no-notice, surprise basis. Coaches/Activity Directors shall not be involved in the collection, storage, labeling, or handling of specimens from random testing. The PPSD shall determine the percentage of activity students tested in any one (1) random test, not to exceed ten percent (10%).

#### **X. Reasonable Suspicion Testing for Activity Students**

PPSD may require any activity student to submit to a drug test if there is reasonable suspicion that the activity student has or is using a prohibited drug and/or alcohol. Reasonable suspicion must be based on observable physical, behavioral or performance indicators of probable drug/alcohol use that can be articulated. Reasonable suspicion will not arise when indicators are not observed as provided in this section of this policy.

The following observation indicators constitute the primary factor for reasonable suspicion testing for **drugs and/or alcohol**:

- 1) Direct observation by a coach/activity director of drug and/or alcohol use.
- 2) Abnormal or erratic behavior indicating intoxication at school, practice, or at an event function or contest.
- 3) Physical symptoms indicating intoxication including but not limited to glassy or bloodshot eyes, slurred speech, loss of balance, poor coordination or reflexes.
- 4) First-hand information provided by reliable and credible (preferably adult) sources of use or intoxication while at school, practice, or at an event function or contest.
- 5) The presence of the drug on the activity student, detectable by the senses, such as the smell of activated marijuana or alcohol.

The following observation indicators constitute the primary factor for reasonable suspicion testing for **anabolic steroids**:

- 1) Rapid, marked increase in body muscle, mass, strength, and performance that cannot be explained alone by training, nutrition, and exercise.
- 2) In addition to the primary factor listed above, reasonable suspicion may be confirmed by
  - a) jaundice due to liver dysfunction
  - b) virilization in females (increased body hair, deepening of voice)
  - c) breast enlargement in males
  - d) insomnia, or
  - e) depression

Any coach/activity director who reasonably suspects that an activity student is using drugs/alcohol or anabolic steroids shall report such suspicions to the PPSD Athletic Director. The coach/activity director and the Athletic Director or Principal must agree that the observable indicators constitute reasonable suspicion of possible drug/alcohol or anabolic steroid use before an activity student can be tested under these provisions. The PPSD Athletic Director with assistance from the coach/activity director will write in reasonable detail the facts, symptoms, or observations that form the basis of the reasonable suspicion.

## **XI. Specimen Collection**

All breath, urine, blood, **saliva**, and hair specimens will be collected under reasonable and sanitary conditions. Individual dignity and privacy will be preserved to the extent

practicable. Universally accepted standards for testing, labeling, storage, and transportation of specimens will be strictly followed by the testing facilities. The MRO will request information before each confirmation test regarding prescription and non-prescription drugs and any other information that could lead to a false positive test. Coaches/activity directors shall not be involved in any specimen collection.

## **XII. Testing Procedures**

A laboratory certified by the National Institute of Drug Abuse will be designated by the PPSD to perform all initial drug and alcohol tests. The laboratory will be responsible for

the handling and safe delivery of all positive specimens to the MRO and such delivery will be accomplished through the proper chain of custody procedures.

### **XIII. Positive Drug and/or Alcohol Test Result Consequences**

If the initial test for drugs or alcohol indicates a negative result, no further test during this particular random sampling will occur unless there is good reason to suspect the quality of the specimen sample. If the initial test indicates a positive result, a confirmation test will be conducted immediately. Should the confirmation test also indicate a positive result, the PPSD Athletic Director will notify the activity student and his or her parent/guardian in writing of such positive test results.

**First Positive:** An activity student, who tests positive for the first time will be required to satisfy the following criteria:

- (1) The student will be denied participation from competitions beginning with the first scheduled competition following the offense and concluding after 20% of the season's competitions have taken place. (Example: 2 of 10 football games or 4 or 20 basketball games)
- (2) The activity student must attend a drug counseling or education program at the activity student's expense. The counselor, activity student, and his or her parents/guardians will determine the length and manner of counseling. Proof of counseling through an approved or certified program must be provided to the PPSD Athletic Director.
- (3) The activity student may continue to participate in his/her extra-curricular activities only after the activity student's parent/guardian signs a Continuance of Participation Waiver that releases the PPSD of any responsibility in case the activity student should have any adverse reaction(s) related to the positive test indicating illegal drug or alcohol use.
- (4) The activity student will be required to submit to periodic or unannounced re-tests up to **nine** months after the first positive test.

Any activity student's refusal to meet any of these criteria will result in his/her immediate removal from all extracurricular activities.

**Second Positive:** An activity student who tests positive for a second time will be required to satisfy the following criteria:

- (1) (1)The student will be denied participation from competitions beginning with the first scheduled competition following the offense and concluding after 50% of the season's competitions have taken place. (Example: 5 of 10 football games or 10 of 20 basketball games)
- (2) The activity student must attend a drug counseling or rehabilitation program at the activity student's expense. Proof of counseling through an approved or certified program with the activity student's attendance record must be provided to the PPSD Athletic Director.
- (3) The activity student may continue to participate in his/her extracurricular activities only after the activity student's parent/guardian signs a Continuance of Participation Waiver that releases the PPSD of any responsibility in case the activity student should have any adverse reaction(s) related to the positive test indicating illegal drug or alcohol use.
- (4) The activity student will be required to submit to periodic or unannounced re-tests up to one calendar year after the second positive.

Any activity student's refusal to meet these criteria will result in his or her immediate removal from all extracurricular activities.

**Third Positive:** An activity student that tests positive for a third time will be suspended from all extra-curricular activities for the remainder of the semester and the next full semester. During the suspension, the activity student will then become part of the general population and be subject to the general student reasonable suspicion testing policy. Having a positive test under that policy could result in alternative placement or expulsion from school.

No positive test results as described under Section XIII of this policy will be used as grounds to discipline, suspend, or expel an activity student, except for the guidelines provided in this policy. Any activity student who intentionally evades a random test will be suspended from practice and competition until a test is taken and may be subject to discipline for the evasion. The student must provide a negative test before being allowed to try-out for or participate in an activity under this policy.

#### **XIV. Appeal**

An activity student has the right to appeal a decision of the PPSD by following the complaint procedures as outlined in School Board Policy JCAA, Due Process – Students' Rights. Participation in extracurricular activities at PHS or PJH is a privilege only, and the activity student has no property rights or interests in extracurricular activities.

#### **XV. Medical Review Officer (MRO)**

PPSD, as part of its activity students' drug and alcohol testing program, will utilize the services of a Medical Review Officer (MRO) as designated by the PPSD. The MRO will interpret, monitor, and evaluate all positive test results so as to determine whether any alternative medical explanation could account for the positive results. The MRO must be a licensed physician, or group of licensed physicians, knowledgeable in drug abuse disorders.

#### **XVI. Confidentiality**

The results of an activity student's drug and/or alcohol test shall not be released to anyone other than the Medical Review Officer, the PPSD Athletic Director, and the activity student's parents/guardians. Results may also be released to the PPSD School Board, the Superintendent or his designee, the school principals or building administrators, school board attorney, and coaches/activity directors on a need-to-know and confidential basis. No other person may receive the test results of an activity student without the express authorization and consent of the activity student and his/her parent/guardian.

#### **XVII. Cost**

PPSD will bear the cost of all drug and alcohol tests required by the PPSD for extracurricular activity students. The activity student or his/her parent/guardian will pay the costs of any retest requested by the activity student or required by the guidelines of this policy.

### **XVIII. Drug Education and Counseling**

PPSD requires all drug education and counseling to be done at the activity student's or his or her parents/guardians expense, as a prerequisite to continuing to participate as an activity student and for reinstatement to an extracurricular activity after suspension.

### **XIX. Use of Prescription or Legal Non-Prescription Drugs**

PPSD recognizes that, from time to time, its activity students, for medical reasons, may take certain drugs prescribed by their physician including certain prohibited drugs. PPSD also recognizes that activity students may, from time to time, for various medical reasons take certain non-prescription drugs. Any activity student who needs to take prescription or non-prescription drugs may (but is not required to) notify the PPSD Athletic Director or his or her coaches/activity directors and provide a copy of the prescription or, in the case of non-prescription drugs, a note from the parent/guardian that the activity student is taking a non-prescription drug(s). If the activity student or parent decides to submit a note, the prescription or the note should state how long the activity student will be taking the drug(s). Both the prescription and the note should be specific about the type or description of drug to be taken. The PPSD Athletic Director shall keep the information confidential and in a secure location.

Prior to an initial drug and/or alcohol test, an activity student may voluntarily disclose the use of any prescription or non-prescription drugs, but will not be required to do so. If the initial test results are positive, the MRO shall request from the activity student and/or parent/guardian information regarding what, if any, prescription and non-prescription drugs the activity student was using at the time of the test.

Information regarding an activity student's need for and use of prescription and non-prescription drugs is considered confidential, sensitive, and private. The information is necessary and will only be used for the assistance of the activity student's needing the medications, the safety of that student and other activity students. In the event of a positive test result, the information is also necessary to assist the MRO in determining possible causes of a false positive test.

The information will only be available to the PPSD Athletic Director or coach/activity director or coach to the extent practical.



**EXHIBIT I****PROHIBITED DRUGS**

1. The following is a list of prohibited drugs:

(a.) **Psychomotor stimulants:**

amphetamine	pemoline	methylamphetamine
benzphetamine	phenmetrazine	methylphenidate
chlorphentermine	pirradol	norseudoephedrine
cocaine	ethylamphetamine	phendimetrazine
diethylpropion	fencamfamin	phentermine
dimethylamphetamine	meclofenoxate	prolintane and related compounds

(b.) **Sympathomimetic amines:**

chlorprenaline	methoxyphenamine	methylephedrine
cphedrine	isoprenaline	phenylpropanolamine
ctafedreine	isoetharine	and related drugs

(c.) **Miscellaneous central nervous system stimulants:**

amiphenazole	crolethamide	nikethamide
bernigrade	doxapram	picrotoxine
caffeine	ethamivan	strychnine
cropropamide	leptazol	and related compounds

(d.) **Anabolic steroids:**

clostebol	methenolone	oxymesterone
dehydrochlormethyl- testosterone	methandienone	oxymetholone
fluoxymesterone	nadrolone	stanozolol
mesterolone	norethandrolene	testosterone
	oxandrolone	and related compounds

(e.) **Alcohol**

(f.) **Diuretics:**

bendroflumethiazide	ethacrynic acid	metolazone
benzthiazide	flumethiazide	polythiazide
bumetanide	flurosemide	quinethazone
chlorothiazide	hydrochlorothiazide	spironolactone
chlorthalidone	hydroflumethiazide	triameterene
cyclothiazide	methyclothiazide	trichlormethiazide
		and related compounds

(g.) **Street drugs:**

amphetamine	marijuana
cocaine	MDMA "Ecstasy"
heroin	THC (tetrahydrocannabinol)

2. Exceptions may be made for those activity students with a documented medical history demonstrating the need for regular use of such a drug.

**CONTINUANCE OF PARTICIPATION WAIVER  
PPSD DRUG AND ALCOHOL TESTING PROGRAM**

According to the PPSD Drug and Alcohol Testing Policy, after the first positive test my child/ward may be allowed to continue participation in his/her chosen activity. I understand the possible health risks that are associated with physical activity and drug/alcohol use. Considering the level of risk for my child/ward, I would like to ask that the PPSD consider allowing him/her to continue to participate in his/her activities. I understand that this request will be up to the discretion of the PPSD. I agree that the PPSD is not responsible for any harm that my child/ward may suffer if he/she continues to participate. This waiver is a one-time option and will be affective no more that 30 days.

---

Printed name of student

---

Signature of student

---

Printed name of parent or legal guardian

---

Date

---

Signature of parent or legal guardian

**REQUEST FOR DRUG TESTING  
PPSD DRUG AND ALCOHOL TESTING PROGRAM**

I request that my son/daughter be drug tested in the next group testing at PHS/PJH. As an activity student my child is currently in the testing pool and subject to random testing. This request is to allow my child to be tested regardless of the random selection. I understand that the cost of \$25.00, for this request will be paid by me in advance to MEA Drug Testing Consortium. If my child is part of the random selection at the time of the next group selection, then the school will be responsible for the cost of the test. This information is unknown until the time of the next test. My child will be subject to all protections and consequences according to the PPSD Extracurricular Drug Testing and Alcohol Testing Program.

---

Printed name of student

---

Printed name of parent or legal guardian

---

Date

---

Signature of parent or legal guardian

**NON-ACTIVITY STUDENT CONSENT  
PPSD DRUG AND ALCOHOL TESTING PROGRAM**

As a Non-activity student, I do not currently participate in the activities that are included in this policy. At this time I request to be added to the drug testing pool. I understand that I will be subject to the random selection as all other students in the pool. I have received a copy of the Pearl Public School District Extracurricular Drug and Alcohol Testing Policy. I have had the opportunity to read and understand the policy, and I agree to comply with the rules and regulations of the program. I hereby consent to random testing throughout the current school year as outlined in the policy. I authorize the confidential release of testing results to the Pearl Public School District Athletic Director, and to my parent or guardian as provided in the policy.

---

 Printed name of student

---

 Student Cafeteria ID Number

---

 Signature of student

---

 Date

 Grade: 7<sup>th</sup> 8<sup>th</sup> 9<sup>th</sup> 10<sup>th</sup> 11<sup>th</sup> 12<sup>th</sup>

**CONSENT AND ENDORSEMENT OF PARENT/GUARDIAN**

I, the parent/guardian of the above Non-activity student, join in the above request and consent. I have received, read and understand the Pearl Public School District Extracurricular Drug and Alcohol Testing Policy and that I consent to the testing of my Non-activity student as provided in the policy.

---

 Printed name of parent or legal guardian

---

 Date

---

 Signature of parent or legal guardian

**Both student and parent must sign and return this consent form to be added to the pool as a Non-activity student. To be removed from the testing pool, both the student and parent/guardian must provide written notification to the athletic director.**

**REFUSAL TO BE DRUG TESTED  
PPSD DRUG AND ALCOHOL TESTING PROGRAM**

After being randomly selected to be tested in the Pearl Public School District Extracurricular Drug and Alcohol Testing Program and with parental consent, I **refuse** to be tested. I realize by refusing to be tested I will be ineligible to participate in any PPSD extracurricular activities for the remainder of the current school year.

Reason for refusal:

\_\_\_\_\_ No longer involved in any extracurricular activities

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Printed name of student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent or legal guardian

Grade: 7<sup>th</sup> 8<sup>th</sup> 9<sup>th</sup> 10<sup>th</sup> 11<sup>th</sup> 12<sup>th</sup>

Parent contacted \_\_\_\_\_

Time \_\_\_\_\_

\_\_\_\_\_  
Printed name of parent or legal guardian

Parent Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*To be removed from the testing pool, both the student and parent/guardian must provide written notification to the athletic director.**

**STUDENT REFERRAL FOR COUNSELING  
PPSD DRUG AND ALCOHOL TESTING PROGRAM**

***Completed by Parent or Guardian & School***

Name of Center: _____	
Counselor's Name: _____	
Date of Referral: _____	
Reason for Referral: _____	
_____	
_____	
_____	
_____	
_____	_____
<b>Referred by</b>	<b>School</b>

***Completed by Counselor***

Assessment/Plan: _____	
_____	
_____	
_____	
_____	
_____	
_____	_____
<b>Counselor's Signature</b>	<b>Date</b>

**Return to: Athletic Director, Pearl High School, 500 Pirate Cove, Pearl, MS 39208**

***For school use only***

Start Date: _____	End Date: _____
Number of Sessions: _____	Offense #: _____

**REQUEST OF PROOF OF COUSELING  
PPSD DRUG AND ALCOHOL TESTING PROGRAM**

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Your child/ward \_\_\_\_\_, tested positive for a prohibited drug on \_\_\_\_\_. Under the Pearl Public School District's Extracurricular Drug and Alcohol Testing Program an activity student, who tests positive for the **first time** will be required to satisfy the following criteria:

- (1) The activity student must attend a drug counseling or education program at the activity student's expense. The counselor, activity student, and his or her parents/guardians will determine the length and manner of counseling. Proof of counseling through an approved or certified program must be provided to the PPSD Athletic Director.
- (2) The activity student may continue to participate in his/her extracurricular activities only after the activity student's parent/guardian signs a Continuance of Participation Waiver that releases the PPSD of any responsibility in case the activity student should have any adverse reaction(s) related to the positive test indicating illegal drug or alcohol use.
- (3) The activity student will be required to submit to periodic or unannounced re-tests up to nine months after the first positive test.

Any activity student's refusal to meet any of these criteria will result in his/her immediate removal from all extracurricular activities.

**As of the date above, proof of counseling has not been provided to this office. For your child/ward to remain in this program and be eligible for extracurricular activities you must contact us immediately to clear this matter up! If we are not contacted within the next 5 working days your child/ward will be removed from this program and will not be allowed to participate in extracurricular activities for a full calendar year!**

Contact: Richard Smithhart @ 601-939-7063 or 601-664-9723

## **Referral List For Drug Testing Program**

1. **Crossgates Baptist Church**  
8 Crosswoods Road  
Brandon, MS  
601-825-2562  
Claude Shufelt
2. **Park Place Baptist Church**  
5701 Highway 80 East  
Pearl, MS  
601-939-6282  
Cody Busby
3. **Church of Choice**  
Must provide church name, address  
Phone number and contact person
4. **Brentwood Behavioral Healthcare**  
3531 Lakeland Drive  
Flowood, MS  
601-936-2024
5. **Cares Center, Inc./The Ark**  
1801 N. West Street  
Jackson, MS  
601-355-0077
6. **Regions 8 CMHC**  
613 Marquette Road  
Box 88  
Brandon, MS  
601-824-0342  
Contact: Jackie Chatmon
7. **ICARE-International Community Awareness Redevelopment Exchange, Inc.**  
931 Highway 80 West  
Jackson, MS  
601-352-9047
8. **Jackson State University/Applied Psychological Services Clinic**  
Robinson Liberal Arts Building  
Dalton Street/Suite 327, 3<sup>rd</sup> Floor  
Director: Pamela Banks  
Phone: 601-979-3381
9. **Reformed Theological Seminary  
Center for Marriage and Family Therapy**  
5422 Clinton Blvd.  
Jackson, MS 39209  
Clinic Coordinator: Barbara Martin, M.A.  
Phone: 601-923-1645 to schedule appt.  
Does individual counseling/ Fee based on income



