



ATTACHMENT TO ALL EMPLOYMENT APPLICATIONS:

The attached application is not intended in any way to be a contract between Action Air Systems, Inc. and the applicant.

Action Air Systems, Inc. is an at-will employer. This means either party, the employee or the employer, can terminate the employment relationship at any time for any reason.

CONSENT TO DRUG TEST, PHYSICAL & RELEASE INFORMATION:

Action Air Systems, Inc. is concerned with the safety, health, and well-being of all of its employees, as well as the quality of products and services we provide. Misusing alcohol, drugs, and controlled substances jeopardizes our operations. Therefore, we require applicants to undergo a pre-employment test for the presence of drugs and illegal substances to the extent allowable under state and federal law. Positive results may cause the disqualification of the individual to the extent permissible under law. We require that you complete this consent and release form in accordance with this policy.

I, _____, do hereby consent to undergo a pre-employment drug test & physical as part of my application with Action Air Systems, Inc. I understand that further consideration for employment may depend upon the results of this test as well as other factors to the extent permitted under applicable state and federal law. Further, I authorize the clinic, laboratory, hospital, or testing facility to release to Action Air Systems, Inc. the results of this test and I release Action Air Systems, Inc., its agents and the clinic, laboratory, hospital or testing facility and their agents, doctors, staff and medical personnel from any and all liability arising from the release or use of this information.

I have read the above and understand its meaning. I have had the opportunity to ask questions regarding any information I did not understand. I also understand that all offers of employment are contingent upon the results of reference/background checks, pre employment drug screen and physical and the ability to full complete the required I-9 (Immigration and Naturalization-Employment Eligibility Verification) form.

Signature _____ Date _____