

2025-2026

Brackett ISD

STUDENT DRUG TESTING CONSENT FORM
FOR MINOR STUDENT (LESS THAN 18 YEARS OLD)

Brackett High School

I, _____, as a parent or guardian of
(Please Print Name of Parent/Guardian)

_____, a minor student enrolled in
(Please Print Name of Student)

Brackett ISD and participating in school sponsored extracurricular activities and/or requesting campus parking/driving privileges (includes, but not limited to, all athletic sports, band, choir, flags and twirlers, One Act Play, Cheerleading, Mascot, FFA, FCA, NHS, Student Council, Drama Club, and all UIL activities), have read and understand Brackett ISD's policy regarding random student drug testing.

I understand that my child will be asked to provide a urine sample for drug analysis, and I consent to such testing conducted as part of the District's drug testing policy.

I also understand that while my child cannot be compelled to produce a specimen, the giving of a specimen when requested by the District is a condition of my child's continued participation in the identified extracurricular activities/privileges. I understand that if a test of my child's specimen reveals an unexplained presence of a drug, the District may take action against my child up to and including termination of participation in extracurricular activities or removal of campus parking/driving privileges.

I understand that refusal to submit to a test will have the same consequence as if my child had tested positive.

Student Signature

Date

Parent/Guardian Signature

Date