

Positive Drug Test Statement

**Clinton County Common Pleas Court
46 S. South St.
Wilmington, Ohio**

Positive Drug Test Statement

I, _____, understand that I have received a positive urinalysis for drug
and _____ /or alcohol. Drugs tested positive for are:

I further understand that I may request a re-test. If I request a re-test, I understand that I will pay all costs associated with the confirmation test, provided the confirmation test is also positive. If the confirmation test is negative, the court will pay the costs for the re-test

____ I do hereby waive my option for a confirmation test and accept the positive result of the initial screen. I recognize that this acceptance constitutes a full confession of drug/alcohol use during the period covered by the specimen.

____ I do hereby request a re-test (confirmation test) of the specimen which yielded the positive result. I will pay the cost for the re-test if the initial positive test is confirmed.

Comments:

Probationer Signature

Date

Supervision Officer Signature

Date