

LEYTON PUBLIC SCHOOLS BOARD OF EDUCATION POLICY #5900

Extracurricular Drug Testing Program

The school district supports and values student participation in extracurricular activities, but such participation in school district extracurricular activities is a privilege and not a right. Students in all extracurricular activities in grades 6-12 shall be subject to mandatory and random testing for the presence of, tobacco/nicotine, alcohol, or illegal drugs.

1. Purpose of Random Drug Testing

- a.** The school district seeks to provide safe, substance-free schools.
- b.** The school district has recognized that observed and suspected drug, alcohol, and tobacco/nicotine use and abuse has increased among the student population, including students participating in extracurricular activities.
- c.** The school district seeks to deter the use of illegal and prohibited drugs, alcohol, and tobacco/nicotine among students.
- d.** The school district recognizes that students who use illegal and prohibited substances pose a threat to the health and safety of themselves, other students, teachers, administrators, and other persons.
- e.** The school district believes that the drug, alcohol, and tobacco/nicotine problem among the student body will be addressed by making sure that the large number of students participating in extracurricular activities do not use drugs, alcohol, and tobacco/nicotine and have an ongoing reason to say, "No," when presented with a chance to use.

2. Notice.

Each student who participates or seeks to participate in extracurricular activities shall be given a copy of this policy. This policy may also be included in the student handbook.

3. Drug Testing Coordinator.

The Drug Testing Coordinator shall be the Activities Director or his or her designee unless otherwise indicated.

4. Extracurricular Activities.

This policy applies to any activity that meets the guidelines of an extracurricular activity at the school district which includes but is not necessarily limited to the following:

Basketball	Band/Jazz Band	Student Council
Cheerleading	FFA	Speech
Track	Musicals/One Act	Quiz Bowl
Football	Wrestling	School Dances
Cross Country	Show Choir	
Golf	Volleyball	

5. Students Who Are Required to Submit to Drug Testing

- a. **Grades.** All students in grades 6-12 who participate in any extracurricular activity or competition are part of the pool subject to random drug testing.
- b. **Consent.** A student and his or her parent(s)/guardian(s) must sign a consent form before the student shall be eligible to try out for, practice with, or participate in the extracurricular activity. The consent form is attached to this policy.
- c. **Selection Pool Eligibility.** Students shall remain in the selection pool for an entire calendar year (365 days) from the date the consent form is received by the school district.
- d. **Withdrawal.** Students who have a consent form on file remain eligible for drug tests from the date the consent form is received by the school district and throughout the remainder of the school year or until the student files a Withdrawal of Student from Activity form signed by the student and his or her parent(s)/guardian(s). Upon withdrawal, the student shall not be eligible to participate in any activity that is subject to drug testing for the remainder of the school year. A student who files a Withdrawal of Student from Activity form after selected for a random drug test but before submitting to the test or after testing positive shall be ineligible to participate in any extracurricular activities for one calendar year from the date the Withdrawal of Student from Activity form is received by the Drug Testing Coordinator.

6. Drugs.

Students participating in extracurricular activities are prohibited from using, possessing, distributing, manufacturing, or having drug, alcohol, and tobacco/nicotine present in their system. For purposes of this policy, "drugs" means:

- a. Any substance considered illegal by the Uniform Controlled Substances Act, NEB. REV. STAT. § 28-401 *et seq.*
- b. Any substance which is controlled by the Food and Drug Administration unless prescribed to the student by any

licensed medical practitioner authorized to prescribe controlled substances or other prescription drugs;

- c. Alcohol for any student under the age of 21. Alcohol shall have the meaning as provided in NEB. REV. STAT. § 48-1902(1);
- d. Any tobacco or other substance which introduces nicotine and other tobacco-related substances into the body, including alternative nicotine products, vapor products, or electronic nicotine delivery systems ingested in any way, such as by use of an e-cig, vape pen, or Juul.

7. Testing Procedures

- a. **Student Selection.** All students who participate in extracurricular activities and submit a consent form will be included in a master list and will be subject to random drug screening. The master list shall be submitted to the company employed by the district to conduct the testing.
- b. **Reasonable Suspicion Testing.** In addition to random drug testing, a student is subject to drug testing at any time when the Drug Testing Coordinator determines there is individualized reasonable suspicion based upon articulable facts to believe that the student has used a drug. The Drug Testing Coordinator will notify the student and take the necessary steps to schedule a test as soon as practicable.
- c. **Parental Request.** Students who do not participate in extracurricular activities may be added to the random drug screening master list upon parental request. Parent(s)/guardians may also request that their student be subject to non-random drug screening. The school will arrange for the test as soon as practicable. The parent(s)/guardian(s) making a request under this subparagraph must submit a signed consent form and indicate which type of test is being requested. Any cost associated with tests administered as a result of parental request must be paid by the parent(s)/guardian(s) in advance of the test.
- d. **Type of Test.** The school district reserves the right to utilize breath, saliva, hair, urinalysis, or any other reliably recognized testing procedures. Urine and oral fluid samples which screen positive will be confirmed by GC/MS. Positive saliva or breath alcohol tests will be confirmed by EBT (Evidential Breath Tester). Other testing methods will be confirmed via industry-recognized processes and equipment.
- e. **Collection Site.** The Drug Testing Coordinator will designate the collection site at which student will provide specimens. The collection site may be off the premises of the school district.

- f. Collection Procedures.** The school board will select a Drug Program Administrator (DPA). The DPA shall randomly select the students subject to drug testing from the master list on a monthly basis during the official time activities on in-season.
- (i) The DPA will make selection based on 10% of Student pool monthly.
 - (ii) The DPA will maintain and follow generally accepted industry standards for collecting, maintaining, shipping, and accessing all specimens. The DPA will seek to obtain the sample in a manner designed to ensure accurate testing protocols while minimizing intrusion into a student's privacy.
 - (iii) The DPA and the school district will provide a copy of the collection procedures upon request.
- g. Drugs.** Students may be randomly tested for any drugs, including but not limited to nicotine, alcohol, amphetamines, marijuana or cannabinoids, cocaine, methadone, methaqualone, propoxyphene, hallucinogens, opiates, phencyclidine, synthetic opiates and PCP, steroids, barbiturates, benzodiazepines, alcohol, and any prescription drug that was obtained without proper authorization.
- h. Results.** The DPA shall notify the student and the Drug Testing Coordinator of any positive test after the initial screening. The school representative shall notify the student's parents. The DPA will use a secure method to transmit all positive test results to the DPA's Medical Review Officer (MRO). The MRO will be certified by an MRO accreditation body. The MRO will be responsible for reviewing test results and determining whether the use of a substance identified by the sample analysis is from illicit use or a legitimate medical use. Prior to making a final decision, the MRO or his or her assistant shall contact the student and his or parent(s)/guardian(s) to discuss the result either face-to-face or over the telephone. If the MRO determines the test results are negative, no further action shall be taken against the student. The MRO will report results of verified positives to the DPA. The DPA shall then notify the Drug Testing Coordinator of the positive test result. The Drug Testing Coordinator shall notify the student and his or her parent(s)/guardian(s) and any staff members responsible for implementing the consequences of this policy.
- i. Request for a Retest.** A split specimen will be collected for all testing methods, with the exception of alcohol testing. A positive alcohol test will be confirmed with an EBT device. A student's parent(s)/guardian(s) may request that the split specimen be tested at a second nationally certified laboratory from a list provided by the MRO. The request for the test must be submitted in writing to the MRO (with a

copy sent to the Drug Testing Coordinator) within 72 hours of being notified of the final testing result. The student and his or her parent(s)/guardian(s) must pay the associated costs for an additional test in advance. The costs will be reimbursed if the result of the split sample test is negative. The student will remain subject to the consequences of this policy during the retesting procedure.

8. Negative Tests.

Students and their parents will receive verbal or written notice when the student's test result is negative.

9. Consequences for Testing Positive.

Whenever the test results indicate the presence of drugs, Drug Testing Coordinator shall schedule and hold a confidential meeting with the student, parent/guardian, and sponsor/coach. Other members of the school's administration may also attend the meeting. At the meeting, the Drug Testing Coordinator shall explain the drug testing procedures and the policy of the district. The consequences shall be as follows (**All offenses are cumulative in grades 6-8. Offenses that occur in grades 6-8 shall not count as offenses in grades 9-12. All offenses are cumulative in grades 9-12**):

a. First Offense

- i. The student will be ineligible to publicly perform in any extracurricular activity for **14 calendar days**. The day of the positive test result shall be the first day for counting purposes. If the end of the activity precedes the end of the **14 calendar days**, the remaining days will carry over to the next activity, so the student completes the required number of days.
- ii. The student shall attend a drug, alcohol, and/or tobacco/nicotine counseling or educational program at the student's expense as arranged or approved by Drug Testing Coordinator.
- iii. The student must submit to a district administered test and test negative before returning to the activity. The student will return to the random pool.

b. Second Offense

- i. The student will be ineligible to publicly perform in any extracurricular activity for **42 calendar days**. The day of the positive test result shall be the first day for counting purposes. If the end of the activity precedes the end of the **42 calendar days**, the remaining days will carry over to the next activity, so the student completes the required number of days.

- ii. The student shall obtain a drug and alcohol assessment at student's expense from a certified substance abuse counselor or licensed mental health provider who holds a valid license that includes in its scope of practice the ability to administer substance abuse evaluations and/or treatment. The student shall provide written proof of obtaining the assessment to Drug Testing Coordinator. The student is strongly encouraged to comply with the assessment recommendations.
- iii. The student must submit to a district administered test and test negative before returning to the activity. The student will be subject to follow-up drug tests at least one time per month for the next **six (6) months** or end upon graduation.

c. Third Offense

- i. The student will be ineligible to practice or publicly perform in any extracurricular activity for one year from the date of the third positive test or end upon graduation. The day of the positive test result shall be the first day for counting purposes.
- ii. The student must submit to a district administered test and test negative before returning to the activity. The student will be subject to follow-up drug tests at least one time per month for the next **twelve (12) months** or end upon graduation.

d. Fourth Offense

- i. The student will be ineligible to participate in any extracurricular activity for the remainder of the student's time at the school district.

10. Refusal to Test.

A student who refuses to submit to a drug test authorized under this policy or fails or refuses to comply with any other provision of this policy, shall not be eligible to participate in any activities covered under this policy including all meetings, practices, performances and competitions for the **next twelve (12) months**.

11. Tampering.

Tampering is the use of any agent or technique which is designed to avoid detection of a drug and/or compromise the integrity of a drug test and is prohibited. This includes providing false urine samples (for example, urine substitution), contaminating the urine sample with chemicals or chemical products, the use of diuretics to dilute urine samples, and the use of masking. If the Drug Testing Coordinator determines that a student tampered with a drug test, the student shall be deemed to have submitted a positive test.

The use of any such agent or technique shall be treated as a positive test for drugs prohibited by this Policy and shall be subject to the penalties set forth in Section 9 of this Policy.

12. Maintenance of Records

All results of drug testing shall be confidential. Procedures for maintaining confidentiality will be developed by the school district and the testing organization. The Drug Testing Coordinator shall maintain records of positive tests in a secure location. This information will not be available to anyone other than appropriate school personnel and parents. This information will be destroyed upon the student's graduation or one year after the student's class graduates. Under no circumstances will this information become a part of the student's permanent file, nor will it be sent to another school when the student moves to another district or transfers to another school. The school district will not share drug testing results with any law enforcement agencies.

13. Appeal

The school district will rely solely upon the opinion of the MRO to determine whether the positive test result was the result of the consumption of a drug. There shall be no appeal of the test result to any school administrator or the board of education.

14. Severability

If any portion of this policy is deemed to be contrary to the law of the state of Nebraska or the United States by judicial decision or an act of Congress, then only such portion or provision directly deemed to be unconstitutional shall be stricken, and the remainder of the policy shall remain in full force.

Adopted: July 13, 2026

**CONSENT TO PERFORM RANDOM DRUG TESTING
2026-2027**

Student Name _____ Grade _____

As a student and parent:

We understand and agree that participation in extracurricular activities is a privilege that may be withdrawn for violations of the Extracurricular Drug Testing Policy.

We have read the Extracurricular Drug Testing Policy and understand the responsibilities and consequences as an activity participant if the student violates the policy.

We understand that when students participate in any extracurricular activity, they will be subjected to random drug testing, and if they refuse, will not be allowed to practice or participate in any extracurricular activity. We have read this consent statement and agree to its terms.

We understand this is binding while a student is enrolled in _____ School District.

CONSENT TO PERFORM DRUG TESTING

We hereby consent to allow the student named on this form to undergo drug testing for the presence of drugs, alcohol, and tobacco/nicotine in accordance with the Extracurricular Drug Testing Program adopted by the Board of Education. We understand that any samples will be sent only to a qualified laboratory for actual testing. We hereby give our consent to the medical vendor selected by the school board, their Medical Review Office (MRO), laboratory, doctors, employees, or agents, together with any clinic, hospital, or laboratory designated by the selected medical vendor to perform testing for the detection of drugs and to release the results of those tests as provided in the policy. We understand these results will be forwarded to school district officials and will also be made available to us. We agree to sign any necessary releases if requested to do so.

We understand that consent pursuant to this Consent to Perform Random Drug Testing will be effective for all extracurricular activities in which this student might participate during the current school year.

We hereby release the _____ Board of Education and its employees from any legal responsibility or liability for the release of such information and records, pursuant to the policy.

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

WITHDRAWAL OF STUDENT FROM ACTIVITY
2026-2027 SCHOOL YEAR

I understand that by signing this form I am rescinding my permission for random drug, alcohol, and tobacco/nicotine screening and no longer wish to participate in any extracurricular activity. I further understand that I am forfeiting my privilege to participate in athletics and/or extracurricular activities for the remainder of this school year.

I hereby rescind my consent to the administration of the drug screening and forfeit all participation in extracurricular activities for the remainder of the school year at the school district.

Student's Printed Name: _____

Signature: _____ Date: _____

Parent/Guardian's Printed Name: _____

Signature: _____ Date: _____