

\_\_\_\_\_  
Name: Last, First, MI (Please Print)

**EMPLOYEE CERTIFICATION OF NOTIFICATION  
REGARDING A DRUG-FREE WORKPLACE AT  
EASTERN WYOMING COLLEGE**

I certify that I have been provided information describing the standards of conduct that prohibit the unlawful possession, use, or distribution of illicit drugs and alcohol. I have also received information regarding legal sanctions, health risks, assistance programs, and college disciplinary sanctions for employee behavior associated with illicit drugs and alcohol abuse.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

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I certify that I have been provided a copy of, or online access to the EASTERN WYOMING COLLEGE STUDENT EMPLOYMENT HANDBOOK.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date